FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 17 AM 10: 19
12/20

1. Name of Limited Partnership

BLY PARTNERS LTD.

1a. DOCUMENT # A96000001150

Mailing Address
~~C/O NORMAN H. BECKER, CPA~~
~~2404 HOLLYWOOD BLVD.~~
~~HOLLYWOOD FL 33020~~
1581 Brickell Ave

Principal Office Address
~~C/O NORMAN H. BECKER, CPA~~
~~2404 HOLLYWOOD BLVD.~~
~~HOLLYWOOD FL 33020~~

2. Mailing Address: C/O HARVEY L. YOUNG
Suite, Apt. #, etc: T 201
City & State: MIAMI FL
Zip: 33129 Country: USA

2a. Principal Office Address: C/O HARVEY L. YOUNG
Suite, Apt. #, etc: T 201
City & State: MIAMI FL
Zip: 33129 Country: USA

3. Date Formed or Registered: 06/19/1996

3a. Date of Last Report:

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on record: $3,000,000.00

5b. Amount of Capital Contributions in FLORIDA to date: 2,000,000

6. FEI Number: 65-0188124 ☐ Applied For ☐ Not Applicable

7. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

8. Make check payable to Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

~~BECKER, NORMAN H~~
~~C/O NORMAN H. BECKER, CPA~~
~~2404 HOLLYWOOD BLVD.~~
~~HOLLYWOOD FL 33020~~

10. If changed, new Registered Agent/Office

Name: HARVEY L. YOUNG
Street Address (P.O. Box Number Is Not Acceptable): 1581 BRICKELL AVE
Suite, Apt. #, etc: T 201
City: MIAMI FL Zip Code: 33129

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE 12/10/96

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
BLY CORP.	~~2404 HOLLYWOOD BLVD.~~ 1581 BRICKELL AVE T201 ~~MIAMI FL 33129~~	~~HOLLYWOOD FL 33020~~ MIAMI FL 33129	P96000047814

200002[illegible] 1
12/26/96 01021 001
****585.00 ****585.00

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE X _____ PRES DATE X 12/10/96

Typed or Printed Name of General Partner Signing Form X HARVEY L. YOUNG PRES Daytime Telephone Number X 305-856-3726

CR2E003 (6/96)

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