

**FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE**

FILED

97 APR 28 AM 9: 01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1997



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

1. Name of Limited Partnership  CORAL WEST PLAZA II, LTD.	1a. DOCUMENT # <b>A96000001572</b>  <i>97-AR CM</i>
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Mailing Address C/O CORAL WEST PLAZA II, INC. 2480 S.W. 137TH AVENUE, SUITE 238 MIAMI FL 33175	Principal Office Address C/O CORAL WEST PLAZA II, INC. 2480 S.W. 137TH AVENUE, SUITE 238 MIAMI FL 33175	3. Date Formed or Registered <b>08/22/1996</b>	5a. Capital Contributions as Shown on record. <b>\$9,000.00</b>
2. Mailing Address Suite, Apt. #, etc.	2a. Principal Office Address Suite, Apt. #, etc.	3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:
City & State	City & State	4. State or Country of Formation <b>FL</b>	
Zip Country	Zip Country	6. FEI Number <b>65-0688415</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		7. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
8. Make check payable to: Dept. of State (See reverse side for fee information)			

9. Name and Address of Current Registered Agent  <b>ALAYON, RICHARD ALAN ESQ</b> 2450 S.W. 137TH AVENUE, SUITE 220 MIAMI FL 33175	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City <b>FL</b> Zip Code
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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 \_\_\_\_\_

**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)  CORAL WEST PLAZA II, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)  2460 S.W. 137TH AVENUE	11b. City, State & Zip Code  MIAMI FL 33175	11c. Registration/ Document Number  P98000070218
<p>300002170173--2 -05/07/97-01110-010 ****165.00 ****165.00</p>		<p><i>Subscribed within time frame. - 4/28</i></p>	

**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 *[Signature]*

DATE **4/1/97**

Typed or Printed Name of General Partner Signing Form \_\_\_\_\_

Daytime Telephone Number \_\_\_\_\_

CR2E003 (11/96)