

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 Mortham Secretary of State DIVISION OF CORPORATIONS
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1. Name of Limited Partnership CORAL WEST PLAZA III, LTD.	1a. DOCUMENT # A96000001573 <i>97-AR-cus CM</i>
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Mailing Address C/O CORAL WEST PLAZA III, INC. 2460 S.W. 137TH AVENUE, SUITE 238 MIAMI FL 33175	Principal Office Address C/O CORAL WEST PLAZA III, INC. 2460 S.W. 137TH AVENUE, SUITE 238 MIAMI FL 33175	3. Date Formed or Registered 08/22/1996	5a. Capital Contributions as Shown on record. \$9,000.00
2. Mailing Address	2a. Principal Office Address	3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. State or Country of Formation FL	
City & State	City & State	6. FEI Number 45-0688417 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip Country	Zip Country	7. Certificate of Status Dealt <input type="checkbox"/> \$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 ALAYON, RICHARD ALAN ESO 2450 S.W. 137TH AVENUE, SUITE 229 MIAMI FL 33175
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10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number, Not Recommended) Suite, Apt. #, etc. City FL Zip Code

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
CORAL WEST PLAZA III, INC.	2460 S.W. 137TH AVENUE	MIAMI FL 33175	P98000070209

Returned with same form - Act

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 effect 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 provided by chapter 620, Florida Statutes.

SIGNATURE _____ DATE **4/1/97**

Typed or Printed Name of General Partner Signing Form _____ Daytime Telephone Number _____

CRZE003 (11/96)