

**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

95 NOV -8 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/11/14

1. Name of Limited Partnership NCS PARTNERS LTD.		1a. DOCUMENT # A96000001632	
Mailing Address 2826 EAST OAKLAND PARK BOULEVARD, SUITE 300 FORT LAUDERDALE, FLORIDA 33308		Principal Office Address	
2. Mailing Address 2826 E. Oakland Park Blvd.		2a. Principal Office Address	
Suite, Apt. #, etc. Suite 300		Suite, Apt. #, etc.	
City & State Fort Lauderdale, FL		City & State	
Zip 33308		Country	
		3. Date Formed or Registered 08/28/96	
		3a. Date of Last Report	
		4. State or Country of Formation Florida	
		5a. Capital Contributions as Shown on records \$108,900.00	
		5b. Amount of Capital Contributions in FLORIDA to date \$108,900.00	
		6. FEI Number 65-0700539	
		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
		7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
		8. Make check payable to: Dept. of State (See reverse side for fee information) \$576.25	

9. Name and Address of Current Registered Agent MARCO A. ROJAS 2826 E. Oakland Park Boulevard, Suite 300 Fort Lauderdale, Florida 33308		10. If changed, new Registered Agent/Office	
		Name	
		Street Address (P.O. Box Number Is Not Acceptable)	
		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
Cold Storage Holdings, Inc.	2826 E. Oakland Park Blvd. Suite 300	Fort Lauderdale FL 33308	P95000067856
<p>600002005906--3 -11/15/96--01063--000 ***576.25 ***576.25</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

Marco Rojas - PRESIDENT

DATE

10-31-96

Typed or Printed Name of General Partner Signing Form

Cold Storage Holdings, Inc.

Daytime Telephone Number **(954)938-0070**

CR2E003 (6/96)