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

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

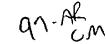
Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A9600002000

CI EAST COLUMBIA, LTD.



FILED
97 MAR 21 PM 2: 51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



COCENTRES. INC. 1303 SOUTH DEVICE HOMMAY. SUITE 1304 CORAL GABLES FL 33146 28. Principal Office Address 39. Mans end Address of Current Registered Agent City & State Country 29. Country 20. Malling Address 39. Mans and Address of Current Registered Agent 10. If charged, represent to the provisions of sections ECO 1031 and 600 150; Provide Stantas, the above-named limited pathiesers for granted under the laws of the State of Provide, address of Provide, address (P.O. But Number is NM Acceptable) 10. If charged, represent to the provisions of sections ECO 1031 and 600 150; Provide Stantas, the above-named limited pathiesers for granted under the laws of the State of Provide, address represent to the provisions of sections ECO 1031 and 600 150; Provide Stantas, the above-named limited pathiesers for granted under the laws of the State of Provide, address represents the section of the Provide Stantas, the above-named limited pathiesers for granted under the laws of the State of Provide, address represents the section of the Provide Stantas, the above-named limited pathiesers for granted under the laws of the State of Provide, address represents the section of the Provide Stantas (P.O. But Number is NM Acceptable) Black Address (P.O. But Number is N		•	O)··			
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28. Principal Office Address 28. Principal Office Address 50th, Apt. #, etc. 60th, Apt. #, etc. 50th, Apt. #, etc. 50th, Apt. #, etc. 60th,		COMAL GABLES PL 33146		38. Date of Last Report		
City & State Country Zip Country Registered Apend City Registered Apend Registered Apend City Registered Apend City Registered Apend Registered Apend City Registered Apend City Registered Apend	2. Mailing Address	2a. Principal Office Address			to date.	
To Country 20 Country 20 Country 20 Country 20 Country 20 S. Make check payable to: Dept of State (See reverse add to fix he information) 9. Name and Address of Current Registered Agent 10, If charged, new Registered Agent/Office	Suite, Apt. #, etc.					
9, Name and Address of Current Registered Agent CI EAST COLUMBIA, INC. CI EAST COLUMBIA, INC. Steed Address (P.O. Dox Number is Not Acceptable) Steed Address of Exp. City FL Zip Code The purpose of changing is registered diple or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(a). I hereby accept the appointment of registered agent. 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(a) 11a. Do Address of Exp. General Partner MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11b. Copy, State & Zip Code 11c. Pegistration DOUGHARD Number CI EAST COLUMBIA, INC. 3315 NORTH 124TH STRE BROOKFIELD WI 53005 P96000086809 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 12. Ido hereby centry that the information supplied with the filing is voluntarily furnished and does not quality for the exemption stated in Section 11907(3)(a), Profide Statutes. I release the Division of Corporations from any inalities of non-correlation with Section 11907(3)(b) in the event that the information supplied is seemed exempt from public access. I furnish certify that the information indicated on the annual reports in the report and in this vigoritary and that he was desired under exempt from public access. I furnish certify that the information indicated on the annual report in the steed on the report of the intented partnership, receiver or trus				7. Certificate of Status Desired	\$8.75 Additional	
CI EAST COLUMBIA, INC. 1380 SOUTH DIXIE HIGHWAY, SUITE 1304 CORAL GABLES FL 33148 Silved Address (P.O. Box Number is Not Acceptable) FL Zip Code 10a. Pursuant to the provisions of sections 620 1051 and 620 192, Ponda Statutes, the above-named limbed partnership organized or registered under the taws of the State of Provida, submits the statement for the purpose of charging its registered office or registered agent, or both, in the State of Provida. Such change was suffortzed by its general partner(s). I hereby accept the appointment of registered agent. In an familie with, and accept the debigations of sections 620 192, Piorida Statutes. 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. Opinot Use Post Office Box Numbers) 11b. Giv, State & Zip Code 11c. Pegistration' Document Number CI EAST COLUMBIA, INC. 3315 NORTH 124TH STRE BROOKFIELD WI 53005 P98000008809 Note: General partnersMAY NOT be changed on this form; an amendment must be filled to change a general partner. 12. Ido hereby certify that the information supplied with this filing is voluminally furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Piorida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(a) in the event must be filled to change a general partner. 12. Ido hereby certify that the information supplied with this filing is voluminally furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Piorida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(a) in the event must be filled to change a general partner of the stricted partnership, incolared on this enqual reports and this my signature shell have with seven the section with section 119.07(3)(a), in the event must be reformation indicated on the enqual reports and the min my signature				8. Make check payable to: Dept. of S	State (See reverse side for fee information)	
CI EAST COLUMBIA, INC. 1390 SOUTH DIXE HIGHWAY, SUITE 1304 CORAL GABLES FL 33148 Silved Address (P.O. Box Number is Not Acceptable) FL Zip Code To Juneary to the provisions of sections 200,1051 and 620-192, Piorida Statutes, the above-named limited partnership organized or registered under the laws of the State of Provide, submits this statement for the purpose of changing its registered office or registered agent, or born, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the spooliment of registered agent. 1 am familiar with, and accept the collegations of sections 200,192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) 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 11b. City, State & 2 ip Code 11c. Progratiator Downstain Number CI EAST COLUMBIA, INC. 3315 NORTH 124TH STRE BROOKFIELD WI 53005 P96000086809 Note: General partnersMAY NOT be changed on this form; an amendment must be filled to change a general partner. 12. Ido hereby certify that the information supplied with the litting is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(s), Florida Statutes. I release the Division of Corporations from any isolably of non-compliance with Section 118.07(3)(s) in the event than the information supplied is general partner desampt from public sources. I further certify that the information indicated on the annual report is use and accompliance with Section 118.07(3)(s) in the event than the information indicated on the annual report is use and accompliance with Section 118.07(3)(s) in the event than the information indicated on the annual report is use and accompliance with the way the sear the same legal effects as if made under cent. Turther certify that if an a General Partner of the kinited partnership, receive for trustee engine an	9. Name and Address of Currel	nt Registered Agent		10. If changed, new Registere	d Agent/Office	
Solita, Apt. 4, etc. City FL Zip Code Solita, Apt. 4, etc. City FL Zip Code The purpose of changing its registered differe 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 he	1390 SOUTH DIXIE HIGHWAY, SUITE 1304					
10a. Pursuant to the provisions of sections 520.1051 and 620.192. Florida Statutes, the above-named limited partnership organized or registered under the Issue of India, submits this statement for the purpose of changing its registered disca 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. Narma(s) of General Partner(s) 11a. Address of Each General Partner (NOT Use Post Office Box Numbers) CI EAST COLUMBIA, INC. 3315 NORTH 124TH STRE BROOKFIELD WI 53005 P98000086809 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 12. I do nereby certify that the information supplied with this titing is voluntarity untilated and does not qualify for the severaption stated in Section 119.07(3)(k), Piorida Statutes. I release the Division of corporations from any italibity of non-compliance with Section 119.07(3)(k) in the worth state the information supplied is federed exempt from pulse cases. I turbure certify that it am a General Partner of the Wnited partnership, recolver or trustee annowment of the Wnited partnership, recolver or trustee. CI East Columbia , Inc. DATE SIGNATURE			Suite, Apt. #, etc.			
10a. Pursuant to the provisions of sections \$20,1051 and \$20.192. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement to the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the epipointment of registered agent. In purpose of changing its registered diffice or registered agent. In the purpose of changing the period of section \$20.192. Florida Statutes. In purpose of changing the period of section \$20.192. Florida Statutes. 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. Maddress of Each General Partner 11b. City, State & Zip Code 11c. Decomment Number CI EAST COLUMBIA, INC. 3315 NORTH 124TH STRE BROOKFIELD WI 53005 P96000088809 Note: General partnersMAY NOT be changed on this form; an amendment must be filled to change a general partner. 12c. I do hereby certify that the information supplied with this timing is voluntarily furnished and does not qualify for the average formation supplied is deemed exampt from pullipatic access. I furnished creating that the information indicated on the annual reports to use and accurate and that my signature shall have the same legal effects as if made under each. I further certify that I am a General Partner of the funited partnership, receiver or trustee encrowered to execute this report as required by chapter 620. Florida Statutes. CI East Columbia, Tinc DATE DATE DATE DATE SIGNATURE			City Zip Code			
CI EAST COLUMBIA, INC. 3315 NORTH 124TH STRE BROOKFIELD W 53005 P96000086809 -03/28/9701096007 ******156.25 ******156.25 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 12. I do hereby certify that the information supplied with this tiling is voluntiarily furnished and does not qualify for the exemption stated in Section 118.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied with the information supplied with 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 520. Florida Statutes. CI East Columbia, Inc. DATE DATE DATE DATE	A GENERAL PARTNER THAT	IS A CORPORATION, LI	MITED PA	ARTNERSHIP OR OTHE		
CI EAST COLUMBIA, INC. 3315 NORTH 124TH STRE BROOKFIELD WI 53005 P96000066809 300002127393-00 -03/28/9701096-007 *****156.25 *****156.25 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 the 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. CI East Columbia, Inc. DATE DATE DATE DATE	11, Name(s) of General Partner(s)	11a. Address of Each General I	Partner Numbers) 11	b. City, State & Zip Code		
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Typed or Printed Name of General Partner Stoning Form Michelile M. Nennia, Wice Fresident Davime Telephone Number 414-781-8760	12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance will annual report is true and accurate and that my signal empowered to execute this report as required by the	this filing is voluntarily furnished and does not q th Section 119.07(3)(k) in the event that the info sture shall have the same legal effects as if mad- apter 620, Florida Statutes.	ualify for the exemp	otion stated in Section 119.07(3)(k), Fiorida 8 deemed exempt from public access. I furthen her certify that I am a General Partner of the	itatutes. I release the Division of certify that the information Indicated on the	