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 # A9600002130

FILED

97 FEB 21 AN 10: 50

SECRETARY OF STATE TALLAHASSEE, FLORIDA



DIM-VIZCAYA LIMITED PARTNERSHIP			I NEBIBII AND ANAK OMIL ODIN BONI BONI SOMI OMIL MODI KADE IMIL ODIN KODI.	
Mailing Address 1650 S.E. 17TH STREET. SUITE 310 FORT LAUDERDALE FL 33316-1735	Principal Office Address 1650 S.E. 17TH STREET. SUITE 310 FORT LAUDERDALE FL 33316-1735		3. Date Formed or Registered 11/18/1996 3a. Date of Last Report	5a. Capital Contributions as Shown on record.
			4. State or Country of Formation	5D. Amount of Capital Contributions in FLORIDA to date:
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For
City & State	City & State	City & State		Not Applicable
Zip Country	Zip	Zip Country		\$8.75 Additional Fee Required State (See reverse side for fee Information)
			O, make the ox payable to Dept. o	State (See levelse side for led Milotrialion)
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office		
DANE, JAN W 1650 S.E. 17TH STREET, SUITE 310 FORT LAUDERDALE FL 33316-1735		Name Street Ardress (P.O. Box Numbertwhentshare and Name		
		Street Address (P.O. Box Numberts) Pt (Capable 2096079 4 Suite, Apt. #, etc02/26/97 01013 005		
		####\$41.25 ####\$41.2S		
		City		FL Zip Code
SIGNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TI		I, LIMITED P	PARTNERSHIP OR OTHE WITH THIS OFFICE.	
11. Name(s) of General Partner(s)	11a. Address of Each Ge (Do NOT Use Post Office		1b. City, State & Zip Code	11c. Registration/ Document Number
DIM-VIZCAYA, INC.	1650 S.E. 17TH STR		FORT LAUDERDALE FL 33	P96000092349
•				
•				_
•		200	1100) 26 1VE	(kaon)
Note: General partners MAY	NOT be changed on this fo	orm: an amen	dment must be filed to ch	ande a general partner.
12. I do hereby certify that the information surplie Corporations from any liability of non-compilar	d with this filing is voluntarily furnished and does with Section 119.07(3)(k) in the event that it signature shall have the same legal effects as	s not quality for the exe ne information supplied	mption stated in Section 119.07(3)(k), Florida is deemed exampt from public access. I further	Statutes. I release the Division of or certify that the Information indicated on thi
SIGNATURE			DATE	R/4/97
Typed or Printed Name of General Partner Signing Fo	Orm JAN W. DA	NE	Daytime Telephone Number 🤇	154)523-2070