

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1a. DOCUMENT #
A96000002223

AEP DADE, LTD.

ONE TURNBERRY PLACE
19495 BISCAYNE BLVD.. SUITE 600
AVENTURA FL 33180

Country

H.

8. Make check payable to Dept. of State (See reverse side for fee information)

\$9,900.00

\$9,900.00

☐ Applied For
☐ Not Applicable

\$8.75 Additional
Fee Required

10. If changed, new Registered Agent/Office

9. Name and Address of Current Registered Agent

Name: _____

Street Address (P.O. Box Number Is Not Acceptable)

Suite Apt # etc.

City

FL Zip Code

BATIEVSKY, HENRY ESQ.
ONE TURNBERRY PLACE
19495 BISCAYNE BLVD., SUITE 600
AVENTURA FL 33180

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). Thereby 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

AMERICAN EQUITY PROPERTIES.

19495 BISCAYNE BLVD..

AVENTURA FL 33180

V47794

02/05/99-01120-010
***158.05 ***158.05

Now, 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)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(s) 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

Typed or Printed Name of General Partner Signing Form

HENRY BARILVSKY, VP

DATE _____

Display Telephone Number

12 | 23 | 98
(305) 933-9200

CR2F003 (8/98)