HILL ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED PARTNERSHIP Sandra B. Mortham ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 98 DEC 22 PM 1:48 DOCUMENT# 1. Name of Limited Partnership A97000002438 MORTGAGE INVESTMENT GROUP 16, LTD. 3. Date Formed or Registered Mailing Address Principal Office Address Capital Contributions as Shown on record. 11/10/1997 307 SOUTH 21ST AVENUE 307 SOUTH 21ST AVENUE \$1,500,000.00 HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 3a. Date of Last Report 03/23/1998 **5b.** Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number 🛄 Applied For ☐ Not Applicable 65-0794317 City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Country Zip Country Zip 8. Make check payable to: Dept. of State (See reverse side for fee information) 10. If changed, new Registered Agent/Office Name and Address of Current Registered Agent Name BIRDMAN, HARVEY Street Address (P.O. Box Number Is Not Acceptable) 307 SOUTH 21ST AVENUE Suite, Apt. #, etc. HOLLYWOOD FL 33020 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), A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ 11. Name(s) of General Partner(s) 11b. City, State & Zip Code 11c. Document Number VACATION INVESTMENT PLAN, IN 307 SOUTH 21ST AVENUE HOLLYWOOD FL 33020 P93000067576 700002738877----01/13/\$)--01003--023 ****528.25 ****526.25

CR2E003 (8/98)

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 the and accurate and that my signature shall have the same legal effects as if made under cath. 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

ntner Signing Form

BIRDIMAN