

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

**LIMITED PARTNERSHIP
ANNUAL REPORT
1999**



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

FILED
99 DEC 11 PM 8 38

1. Name of Limited Partnership

1a. DOCUMENT #
A98000000086

PINES 145, LTD.

Mailing Address

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

Principal Office Address

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

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

Zip

Country

Zip

Country

3. Date Formed or Registered

01/06/1998

3a. Date of Last Report

4. State or Country of Formation

FL

6. FLL Number

65-0804607

7. Certificate of Status Desired

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

\$158.05

5a. Capital Contributions as Shown on record

\$9,900.00

5b. Amount of Capital Contributions in FLORIDA to date

\$9,900.00

☐ Applied For
☐ Not Applicable

☐ **\$8.75 Additional Fee Required**

9. Name and Address of Current Registered Agent

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

Name

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

Suite, Apt. #, etc

City

10. If changed, new Registered Agent/Office

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)

AMERICAN EQUITY PROPERTIES,

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

ONE TURNBERRY PLACE,1

11b. City, State & Zip Code

AVENTURA FL 33180

11c. Registration Document Number

V47794

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

Henry Batievsky

DATE

12/23/98

Typed or Printed Name of General Partner Signing Form

HENRY BATIEVSKY, VP

Daytime Telephone Number

(305) 933-9200

CR2E003 (8/98)