## FILE C V C L BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPÄRTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED 98 DEC 30 AM 9: 54 1999 DIVISION OF CORPORATIONS **DOCUMENT#** 1. Name of Limited Partnership A98000000125 PETROZONE OF OPA LOCKA LTD 3. Date Formed or Registered 5a. Capital Contributions as Shown on record. Mailing Address Principal Office Address 01/08/1998 3475 W FLAGLER ST 3475 W FLAGLER ST \$200.00 MIAMI FL 33135 MIAMI FL 33135 3a. Date of Last Report **5b.** Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation Mailing Address Principal Office Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For 65 079.5390 Not Applicable City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Country Country Zip 8. Make check payable to: Dept. of State (See reverse side for fee information) 10. If changed, new Registered Agent/Office 9. Name and Address of Current Registered Agent VINAS, HECTOR R Street Address (P.O. Box Number is Not Acceptable) 3475 W FLAGLER ST <del>800002747828--</del> Suite, Apt. #, etc. **MIAMI FL 33135** -01/20/99--01060--015 \*\*\*\*750.00 \*Epitode 50.00 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. DATE 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. Address of Each General Partner Registration/ 11c. 11. 11a. (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code Name(s) of General Partner(s) Document Number P97000097056 PETROZONE INC. 3475 W FLAGLER ST MIAMI FL 33135

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 Statute	s. I release the	Division of
	Corporations from any flability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certifications are considered as a constant of the control of the	y that the inform	nation 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 lin		
	empowered to execute this purpose gequired by chapter 620. Florida Statutes.		

Typed or Printed Name of General Partner Signing Form