

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. Mcgrath
Secretary of State
DIVISION OF CORPORATIONS

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99 FEB -1 PM 1:52

1. Name of Limited Partnership

1a. DOCUMENT #
A98000000311

TERREMARK MIAMI RIVER, LTD.



Mailing Address

Principal Office Address

2601 SOUTH BAYSHORE DRIVE PH-1
MIAMI FL 33133

2601 SOUTH BAYSHORE DRIVE PH-1
MIAMI FL 33133

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

02/03/1998

3a. Date of Last Report

5a. Capital Contributions as
Shown on record

\$1,000.00

5b. Amount of Capital
Contributions in FLORIDA
to date

\$1,000.00

4. State or Country of Formation

FL

6. FEI Number

65-0871129

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

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

9. Name and Address of Current Registered Agent

GOODKIND, BRIAN K ESQ.
2601 SOUTH BAYSHORE DRIVE, SUITE 1600
MIAMI FL 33133

10. If changed, new Registered Agent/Office

Name
CT Corporation System
Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Road
Suite, Apt. #, etc
Plantation, FL 33324
City

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):

Patrick A. Nolan
Patrick A. Nolan
Assistant Secretary 2/29/99

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)

TERREMARK MIAMI RIVER, INC.

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

2601 SOUTH BAYSHORE D

11b. City, State & Zip Code

MIAMI FL 33133

11c. Registration
Document Number

P98000010405

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DIVISION OF CORPORATIONS
02/09/99 01013-015
***150.00 ***150.00

2/1/99

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 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

Brian J. Collins

DATE

Typed or Printed Name of General Partner Signing Form: Brian J. Collins, Vice President Daytime Telephone Number: 212-595-1600

CR2E003 (8/98)