

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 JAN -4 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #
A98000000754

THE FOUNTAINS OF FONTAINBLEAU LTD.

Mailing Address

Principal Office Address

782 NORTH LEJUENE ROAD, SUITE 555
MIAMI FL

782 NORTH LEJUENE ROAD, SUITE 555
MIAMI FL

3. Date Formed or Registered

03/24/1998

5a. Capital Contributions as
Shown on record.

\$3,000,000.00

3a. Date of Last Report

5b. Amount of Capital
Contributions in FLORIDA
to date:

2,750,000.00

4. State or Country of Formation

FL

6. FEI Number

65-0821755

☐ 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)

2. Mailing Address

9330 FONTAINBLEAU BLVD.

2a. Principal Office Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

Zip

33172

Country

USA

Zip

Country

9. Name and Address of Current Registered Agent

ONAGHTEN, JUAN T
2665 SOUTH BAYSHORE DRIVE
1100 GRAND BAY PLAZA
MIAMI FL 33133

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt. #, etc.

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)

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

CANTEL APARTMENT VENTURE I,
DON VENTURE III, INC.

782 NORTH LEJUENE ROA
2665 SOUTH BAYSHORE D

MIAMI FL
MIAMI FL

P98000027329
P98000027325

200002748822--8
-01/20/99--01113--024
****526.25 ****526.25

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

DATE

Dec 28, 1998

Typed or Printed Name of General Partner Signing Form

ANTONIO J. CABRERA

Daytime Telephone Number

305-445-2800

CR2E003 (8/98)