FILE ON OR BEFORE APRIL 7, 1999 TO AVOID **REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A98000002568

LABRADA FAMILY LIMITED PARTNERSHIP 95-1

99 APR 20	ATTU: 17
Se Grant Anti- LAND ANASSI LANDER METALLER	
Date Formed or Registered	5a. Capital Contributions as Shown on record
11/10/1998 • Date of Last Report	\$10.00
	5b. Amount of Capital Contributions in FLORIDA

FILED

Mailing Address Principal Office Address		3. Date Formed or Registered Ja. Capital Contributions as Shown on record	
8 218 S.W. 85TH TERRAQ E MI AMI FL 33143	8218 S.W. 85TH TERRACE MIAMI FL 33143	11/10/1998 3a. Date of Last Report	\$10.00
2. Mailing Address	2a. Principal Office Address		Amount of Capital Contributions in FLORIDA o date
1150 N.W 12nd Ave	L '_	FL	
Suite, Apt. #, etc.	Suite, Apt. #, etc	6. FEI Number	Applied For
City & State	City & State	13 69 6 6 6	Not Applicable
migini		7. Certificate of Status Desired	\$8.75 Additional
Zip F1 Country 331%	Zip Country	8. Make check payable to Dept of State (So	Fee Required e reverse side for too inform.
9. Name and Address of Current	Registered Agent	10. If changed new Registered Agent/Offi	

D' Maine and Monday or advant Heliatored Miles) Total god, new registered Agenconice
LABRADA, ARMANDO	Name
8218 S.W. 85TH TERRACE MIAMI FL 33143	Street Address (P.O. Box Number Is Not Acceptable) 9000028529692 Suite, Apt. #, etc04/27/9901045005
	-0472(79301043003 -0472(79301043003 ****141-25 ****141-25
	l

Pursuant to the provisions of sections 620.1051 and 620.192. Florida Statutes, the above-named limited partnership organized or registered under the taws of the State of Florida, submits this statement for the purpose of changing its 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)

LABRADA, IDALIA

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Registration/

11. Name(s) of General Partner(s) LABRADA, ARMANDO

11a. (Do NOT Use Post Office Box Numbers) 8218 S.W. 85TH TERRAC

City, State & Zip Code

for fee information

8218 S.W. 85TH TERRAC

MIAMI FL 33143

MIAMI FL 33143

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. Ido hereby certify that the information supplied with this filing is spluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes 1 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 this signature shall have the same legal effects as it 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 provined by chapter 620, Florida Statutes.

Typed or Printed Name of General Partner Signing Form

2/1/99

Daytime Telephone Number