**FILED** 

Feb 02, 1999 8:00am

**Secretary of State** 

02-02-1999 90004 024 \*\*\*158.75

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio		073366	ı					
GATEWAY LIMITED PARTNER, INC.  1. 17 (17 18 1918 1949)								
Principal Plac	e of Business	Mailing Addre	ss			- 1 10011901 (50 184)) (091) 901)) 003)) ;	<b>je</b> jih <b>go</b> jih 1 <b>0043</b> (1100 1111)	) BING ON THE
1570 MADRUGA	a transfer from the	1570 MADRUG						
200 200								
CORAL GABLES FL 33146 CORAL GABLES FL 33146							IN THIS SPACE	
US .		U\$				3. Date Incorporated or Qualifed 08/25/1997		
2. Principal Place of Business 2a, Mailing Address			ldress			4, FEI Number		pplied For
21		26				65-0778159		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt.				5. Certifcate of Status Desired	<b>y</b> 1	Additional equired
City & Stat	de .	City & Sta	te			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	_	Country		8. This corporation owes the current	l year Intangible	_
24	25	29	3	0		Personal Property Tax.	, 🗌 Yes	□No
	9. Name and Address of Current	Registered Ager	nt			10. Name and Address of New Rec	jistered Agent	
PARAJON, LUIS				81 82	Name Street Addr	ress (P.O. Box Number is Not Acceptable	a)	
SUITE 200						e de describitation de central y 8 de 2 mars	natus Cere, Paring Corner (1986)	e attenti provinciada
CORAL GABLES FL 33146				83	City		85 Zip	Code
amara Sakarani ba	was and rest resident constitution of the			04	City			0000
·		and 607.1508, Fl f Florida. Such ch ons of, Section 60	orida Statutes ange was auti 7.0505, Florid	, the above horized by la Statutes.	e-named corp the corporation	poration submits this statement for the pu on's board of directors. I hereby accept t	rpose of changing its he appointment as re	registered gistered
SIGNATURE	dus our	afor in	<u> </u>				D.T.	h
10	Signature, typed or printed name of registered agent OFFICERS ANI		(NOTE: R	13.	t signature require	ADDITIONS/CHANGES TO OFFICE	DATE	DS IN 12
TITLE	DP OFFICERS AND		DELETE	1.1 TITLE		ADDITIONS/GITANGES TO OFFIC	☐ Change	Addition
NAME	PARAJON, LUIS	_		1.2 NAME		v r ox	<del></del> •	_
STREET ADDRESS	ACTO MADDUOA AUG MOOO			1.3 STREET	ADDRESS	•		
	CORAL GABLES FL 33146			1.4 CITY-ST				
TITLE	DS.	Г	DELETE	2.1 TITLE	1-24		☐ Change	Addition
NAME	DOWNING, WILLIAM D	_		2.2 NAME	'	<i>:</i>	<del>-</del> •	_
STREET ADDRESS	ACTO MANDENION AND MODO			2.3 STREET	· ADDOESS	•		
	CORAL GABLES FL 33146	A Comment		2. 4 CITY-S				
TITLE	COLUMN COLUMN TO THE COLUMN TO		DELETE	3.1 TITLE	1-21-		☐ Change	☐ Addition
NAME	MCM, 1975 Technology and Technology			3.2 NAME			—, ·	
STREET ADDRESS	E 200			3.3 STREET			制度 法法律的	点特別[編]
CITY-ST-ZIP	5 80 80 80 1 1 40 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		DELETE	3.4. CITY - S	T- ZIP		Change	₹ □ Addition
TITLE ;			OLLETE .	4.1 TITLE 4.2 NAME				
NAME STREET ADDRESS	4v .			4.3 STREET	ADDRESS			: .
CITY-ST-ZIP	$\vec{r}_1 = \vec{\psi}$	3.3		4.4 CITY-ST	1	•	* *	. 1
TITLE			DELETE	5.1 TITLE	-	<del></del>	☐ Change	☐ Addition
NAME				5.2 NAME		$\mathcal{H} = \{ \mathbf{x} \in \mathcal{X} \mid \mathbf{x} \in \mathcal{X} \}$		į
STREET ADDRESS				5.3 STREET	ADORESS	•		
CITY-ST-ZIP	€#			5.4 CITY-S1	r-ZIP			
TITLE	Partia Andrew Strand		DELETE	6.1 TITLE			Change	☐ Addition
NAME	(新文·公理報道)			6.2 NAME				
STREET ADDRESS	COMMERCIAL SECTION OF			6.3 STREET	ADDRESS			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or flostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS