



OFFICE OF THE PROPERTY APPRAISER

Summary Report

Generated On : 9/10/2015

Property Information	
Folio:	03-4108-009-0990
Property Address:	114 CALABRIA AVE
Owner	KRITCHMAN ENTERPRISES LTD C/O RAYMOND JAMES & ASSOC
Mailing Address	2525 PONCE DE LEON BLVD STE 600 CORAL GABLES , FL 33134
Primary Zone	5001 HOTELS & MOTELS - GENERAL Med Density
Primary Land Use	0303 MULTIFAMILY 10 UNITS PLUS : MULTIFAMILY 3 OR MORE UNITS
Beds / Baths / Half	16 / 12 / 0
Floors	2
Living Units	12
Actual Area	Sq.Ft
Living Area	Sq.Ft
Adjusted Area	8,574 Sq.Ft
Lot Size	17,172 Sq.Ft
Year Built	1954



Assessment Information			
Year	2015	2014	2013
Land Value	\$1,116,180	\$772,740	\$858,600
Building Value	\$233,820	\$343,260	\$112,750
XF Value	\$0	\$0	\$0
Market Value	\$1,350,000	\$1,116,000	\$971,350
Assessed Value	\$1,175,333	\$1,068,485	\$971,350

Benefits Information				
Benefit	Type	2015	2014	2013
Non-Homestead Cap	Assessment Reduction	\$174,667	\$47,515	

Note: Not all benefits are applicable to all Taxable Values (i.e. County, School Board, City, Regional).

Short Legal Description
8 54 41 CORAL GABLES DOUGLAS SEC PB 25-69 LOTS 6-7 & 8 BLK 12 LOT SIZE IRREGULAR OR 17793-2527 0997 01

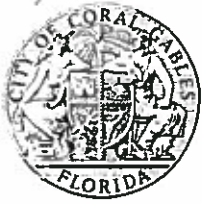
Taxable Value Information			
	2015	2014	2013
County			
Exemption Value	\$0	\$0	\$0
Taxable Value	\$1,175,333	\$1,068,485	\$971,350
School Board			
Exemption Value	\$0	\$0	\$0
Taxable Value	\$1,350,000	\$1,116,000	\$971,350
City			
Exemption Value	\$0	\$0	\$0
Taxable Value	\$1,175,333	\$1,068,485	\$971,350
Regional			
Exemption Value	\$0	\$0	\$0
Taxable Value	\$1,175,333	\$1,068,485	\$971,350

Sales Information			
Previous Sale	Price	OR Book-Page	Qualification Description
09/01/1997	\$529,100	17793-2527	2008 and prior year sales; Qual by exam of deed
04/01/1995	\$0	16739-2257	Qual by exam of deed

CITY'S
EXHIBIT 1

The Office of the Property Appraiser is continually editing and updating the tax roll. This website may not reflect the most current information on record. The Property Appraiser and Miami-Dade County assumes no liability, see full disclaimer and User Agreement at <http://www.miamidade.gov/info/disclaimer.asp>

Version:



The City of Coral Gables

Development Services Department
CITY HALL 405 BILTMORE WAY
CORAL GABLES, FLORIDA 33134

4/1/2014

VIA CERTIFIED MAIL

KRITCHMAN ENTERPRISES LTD
200 S BISCAYNE BLVD 14TH FLR
MIAMI , FL 33131-2310

91 7108 2133 3932 6148 0289

RE: 114 CALABRIA AVE,CORAL GABLES, FL
Folio # 03-4108-009-0990
Recertification of Building 40 Years or older

Gentlemen:

This Department has been advised that the subject building is forty (40) years old, or older, having been built in year 1954.

In accordance with the Miami-Dade County Code, Chapter 8, Section 8-11(f), a Florida Registered Architect or Professional Engineer must inspect said building and a report must be furnished to this Department with ninety (90) days from the date of this letter, indicating that the building meets the requirements of building recertification under the Code. In the event that repairs or modifications are found to be necessary resulting from the recertification inspection, the owner shall have a total of 150 days from the date of this Notice in which to complete indicted repairs or modifications.

The architect or engineer that you choose to do the inspection may obtain the required forms: "*Minimum Inspection Procedural Guidelines for Building Recertification*," from this link: <http://www.miamidade.gov/building/form-checklist.asp> to access the interactive structural and electrical forms. In addition to the forms, a cover letter must state that that the property meets the requirement for building recertification; no additional documents or photographs are necessary.

The certification report, along with the filing fee in the amount of \$380.63; plus, \$2.45 per page document preservation fee must be paid with a check, or credit card payment to the "City of Coral Gables," and sent/delivered to:

**BUILDING RECERTIFICATION SECTION
Coral Gables Building & Zoning Department
405 Biltmore Way
Coral Gables, FL 33134**

Any questions may be directed to (305) 460-5228. Thank you for your prompt consideration.

Sincerely,

Manuel Z. Lopez

Manuel Z. Lopez, P.E.
Building Official

CITY'S

EXHIBIT 2



The City of Coral Gables

Development Services Department
CITY HALL 405 BILTMORE WAY
CORAL GABLES, FLORIDA 33134

7/22/2014

KRITCHMAN ENTERPRISES LTD
200 S BISCAYNE BLVD 14TH FLR
MIAMI, FL 33131-2310

VIA CERTIFIED MAIL

91 7108 2133 3932 6021 9859

Re: Building Recertification
114 CALABRIA AVE
Folio # 03-4108-009-0990

Dear Property Owner:

In a certified letter dated 4/1/2014, this Department notified you the property referenced above requires a 40-year building recertification pursuant to Miami-Dade County Code, Chapter 8, Section 8-11(f). The letter informed you it was necessary to furnish this Department a report prepared by a licensed architect or engineer within 90-days specifying the building meets the requirements for building recertification provided under the Minimum Inspection Procedural Guidelines for Building Recertification.

Please be advised that as of 7/1/2014 the report will be overdue and this building will be deemed to be in NON-COMPLIANCE. This may result in the revocation of the Certificate of Occupancy, as well as, being subject to other penalties as provided in the Code.

Failure to contact us before 10/22/2014, will result in our forwarding this building information to the Miami-Dade County Unsafe Structures Board for further determination.

Please govern yourself accordingly.

Sincerely,

Manuel Z. Lopez

Manuel Z. Lopez, P.E.
Building Official

CITY'S

EXHIBIT

3

40Year.com, Inc., Engineers

Professional Building Recertifications & Due-Diligence Inspections
Florida Registered Engineer, PE 59525

Building Official
The City of Coral Gables
City Hall, 405 Biltmore Way
Coral Gables, FL 33134

October 21, 2014

RE: Recertification Of Buildings – 40 Years Old or Older

Record Owner
Property Address
Folio #

**KRITCHMAN ENTERPRISES LTD
114 CALABRIA AVE
03-4108-009-0990**

Dear Sirs:

This letter shall serve to transmit the attached "MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR BUILDING'S STRUCTURAL & ELECTRICAL RECERTIFICATION" for the above referenced address which will provide an itemized description of the condition of the various components.

This inspection was completed on September 20, 2013.

I attest that this building cannot be recertified at this time pending remediation of defects identified in the attached report.

As a routine matter, in order to avoid any possible misunderstanding, nothing in this report should be construed directly or indirectly as a guarantee for any portion of the structure or electrical system. To the best of my knowledge and ability, this report represents an accurate appraisal of the present condition of the building based upon careful evaluation of observed conditions, to the extent reasonably possible. No warranty is either expressed or implied.

If you have any questions please call me at 305-665-2833.

Respectfully,



Marc O Touze, P.E.

40Year.com, Inc.

Brandon Shackelford

6731 SW 63 Court, Miami, Florida 33143

Telephone 305.665.2833 , Facsimile 305.665.2863

www.40year.com

CITY'S

EXHIBIT

4

**MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR
BUILDING'S STRUCTURAL RECERTIFICATION**

INSPECTION COMMENCED
DATE: September 20, 2013

INSPECTION MADE BY:

SIGNATURE
PRINT NAME


Marc O Touze

INSPECTION COMPLETED
DATE: September 20, 2013

TITLE: Professional Engineer
PE # 59525

ADDRESS: 6731 SW 63 Court
South Miami, FL 33143

Description of Structure

a. Name of Title:

KRITCHMAN ENTERPRISES LTD
114 CALABRIA AVE

b. Street Address:

8 54 41

c. Legal Description:

CORAL GABLES DOUGLAS SEC PB 25-69
LOTS 6-7 & 8 BLK 12
LOT SIZE IRREGULAR
OR 17793-2527 0997 01

d. Owners Name:

KRITCHMAN ENTERPRISES LTD

e. Owner's Mailing Address:

200 S BISCAYNE BLVD 14TH FLR
MIAMI , FL 33131-2310

f. Folio Number of Building:

03-4108-009-0990

g. Building Code Occupancy
Classification:

Group R-1 (Apartments)

h. Present Use:

Apartments

i. General Description, Type of Construction, Size, Number of Stories, Special Features,
and Additional Comment:

Two story CBS structure. Hip roof. "U" plan. 12 Units with Interior entrances.
Approx. 8,574 sq. ft. adj.

Additions to Original Structure:

None apparent

**MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR
BUILDING'S STRUCTURAL RECERTIFICATION**

2. PRESENT CONDITION OF STRUCTURE

- a. General alignment (note good, fair, poor, explain if significant)
 - 1. Bulging Good condition
 - 2. Settlement Good condition
 - 3. Defections Good condition
 - 4. Expansion Good condition
 - 5. Contraction Good condition
- b. Portion distressed (Note, beams, columns, structural walls, floors, roofs, other)
None observed
- c. Surface conditions – describe general conditions of finishes, noting cracking, spalling, peeling, signs of moisture penetration & stains.
Good condition
- d. Cracks – note location in significant members. Identify crack size as HAIRLINE if barely discernible; FINE if less than 1 mm in width; MEDIUM if between 1 and 2 mm in width; WIDE if over 2 mm.
None observed
- e. General extent of deterioration – cracking or spalling of concrete or masonry; oxidation of metals; rot or borer attack in wood.
Good condition overall
- f. Previous patching or repairs
Normal maintenance
- g. Nature of present loading indicate residential, commercial, other; estimate magnitude.
Normal transient

3. INSPECTIONS

- a. Date of notice of required inspection
- b. Date(s) of actual inspection September 20, 2013
- c. Name and qualification of individual submitting inspection report:
Marc O Touze PE # 59525
- d. Description of any laboratory or other formal testing, if required, rather than manual or visual procedures:
None required
- e. Structural repair note appropriate line:
 - 1. None required XXXX
 - 2. Required (describe and indicate acceptance)

4. SUPPORTING DATA

- a. NA sheet written data
- b. NA photographs
- c. NA drawings or sketches



A handwritten signature in black ink, followed by the date 10/21/14.

5. MASONRY BEARING WALL, Indicate good, fair, poor condition:

- a. Concrete masonry units Good condition
- b. Clay tile or terra cotta units Good condition
- c. Reinforced concrete tie columns Good condition
- d. Reinforced concrete tie beams Good condition
- e. Lintel
- f. Other type bond beams
- g. Masonry finishes - exterior
 - 1. Stucco Good condition
 - 2. Veneer
 - 3. Paint only
 - 4. Other(describe)
- h. Masonry finishes - interior
 - 1. Vapor barrier
 - 2. Furring and plaster
 - 3. Paneling
 - 4. Paint only Good condition
 - 5. Other (describe)
- i. Cracks:
 - 1. Location - note beams, columns, other
 - 2. Description None observed
- j. Spalling:
 - 1. Location - note beams, columns, other
 - 2. Description None observed
- k. Rebar corrosion-check appropriate line:
 - 1. None visible XXXX
 - 2. Minor-patching will suffice
 - 3. Significant-but patching will suffice
 - 4. Significant-structural repairs required
- l. Samples chipped out for examination in spall areas:
 - 1. No
 - 2. Yes - describe color, texture, aggregate, quality


10/21/14

6. FLOOR AND ROOF SYSTEM

a. Roof:

1. Describe (flat, slope, type roofing, type roof deck, condition).
Sloped hipped. Tile over wood deck. Good condition.

2. Note water tanks, cooling towers, air conditioning equipment, signs, other heavy equipment and condition of support:

None

3. Note types of drains and scupper and condition:

Sheet flow Good condition.

b. Floor systems(s)

1. Describe (type of system framing, material, spans, condition)

1st Floor Concrete slab. And Conventional Wood Joists fair condition

2nd Conventional Wood Joists – Evidence of recent repairs. Fair condition.

Monitor and maintain as required.

c. Inspection – note exposed areas available for inspection, and where it was found necessary to open ceilings, etc. for inspection of typical framing members.

Adequate visibility

7. STEEL FRAMING SYSTEM

a. Description:

None observed

b. Exposed Steel - describe condition of paint & degree of corrosion:

NA

c. Concrete or other fireproofing – note any cracking or spalling, and note where any covering was removed for inspection

NA

d. Elevator sheave beams & connections, and machine floor beams – note condition:

Hydraulic elevator



Handwritten signature and date: 10/21/14

8. CONCRETE FRAMING SYSTEM

a. Full description of structural system

CBS on concrete spread footers with concrete tie beams/columns.

b. Cracking

1. Not significant XXXX
2. Location and description of members affected and type cracking

c. General condition

Good condition

d. Rebar corrosion - check appropriate line:

1. Non visible XXXX
2. Location and description of members affected and type cracking

3. Significant but patching will suffice

4. Significant - structural repairs required (describe)

e. Samples chipped out in spall areas:

1. No NA
2. Yes, describe color, texture, aggregate, general quality:

9. WINDOWS

a. Type (Wood, steel, aluminum, jalousie, single hung, double hung, casement, awning, pivoted, fixed, other)

Jalousie windows – Fair Condition

b. Anchorage – type & condition of fasteners and latches:

Good condition

c. Sealant – type of condition of perimeter sealant & at mullions:

Fair condition

d. Interiors seals – type & condition at operable vents:

NA

e. General condition:

Fair condition

10. WOOD FRAMING

a. Type – fully describe if mill construction, light construction, major spans, trusses;

Conventional Wood Floor and Roof Trusses and Rafters.

b. Metal fittings: angles, plates, bolts, split pintles, pintles, other, note condition:

None Observed

c. Joints – note if well fitted and still closed:

Good Condition

d. Drainage – note accumulations of moisture:

No Moisture Observed

e. Ventilation – note any concealed spaces not ventilated:

Adequate ventilation

f. Note any concealed spaces opened for inspection:

Access Port to Attic Space



10/21/14

**MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR
BUILDING'S ELECTRICAL RECERTIFICATION**

INSPECTION COMMENCED
DATE: September 20, 2013

INSPECTION MADE BY:

SIGNATURE
PRINT NAME

Marc C. Touze

INSPECTION COMPLETED
DATE: September 20, 2013

TITLE: Professional Engineer
PE # 59525

ADDRESS: 6731 SW 63 Court
South Miami, FL 33143

Description of Structure

a. Name of Title:

KRITCHMAN ENTERPRISES LTD

b. Street Address:

114 CALABRIA AVE

c. Legal Description:

8 54 41

CORAL GABLES DOUGLAS SEC PB 25-69

LOTS 6-7 & 8 BLK 12

LOT SIZE IRREGULAR

OR 17793-2527 0997 01

d. Owners Name:

KRITCHMAN ENTERPRISES LTD

e. Owner's Mailing Address:

200 S BISCAYNE BLVD 14TH FLR

MIAMI , FL 33131-2310

f. Folio Number of Building:

03-4108-009-0990

g. Building Code Occupancy

Group R-1 (Apartments)

Classification:

h. Present Use:

Apartments

i. General Description, Type of Construction, Size, Number of Stories, Special Features, and Additional Comment:

Two story CBS structure. Hip roof. "U" plan. 12 Units with Interior entrances.
Approx. 8,574 sq. ft. adj.

Additions to Original Structure:

None apparent

GUIDELINES AND INFORMATION FOR RECERTIFICATION OF ELECTRICAL SYSTEMS OF FORTY (40) YEAR STRUCTURES

1. ELECTRIC SERVICE

- 1. Size: Amperage (400) Fuses (XXX) Breakers ()
- 2. Phase: 3-Phase () 1-Phase (XXX)
- 3. Condition: Good (XXX) Fair () Needs Repair ()
- 4. Comments: Underground Service to exterior electrical room.
2 main disconnects: 2-200 A-fused.

2. METER AND ELECTRIC ROOM

- 1. Clearances: Good () Fair () Requires Correction (XXX)
- 2. Comments: CBS electric room. Stored material must be permanently removed

3. GUTTERS

- 1. Location: Good(XXX) Requires Repair ()
Line & Load
- 2. Taps and Fill: Good(XXX) Requires Repair ()
- 3. Comments:

4. ELECTRICAL PANELS

- 1. Panel # (1) Location: Electric room
Good(XXX) Needs Repair ()
- 2. Panel # (2-13) Location: Apartments
Good(XXX) Needs Repair ()
- 3. Panel # () Location: Good() Needs Repair ()
- 4. Panel # () Location: Good() Needs Repair ()
- 5. Panel # () Location: Good() Needs Repair ()
- 6. Comments: Good() Needs Repair ()

5. BRANCH CIRCUITS

- 1. Identified: Yes () Must be Identified (XXX)
- 2. Conductors: Good (XXX) Deteriorated() Must Replace ()
- 3. Comments:

6. GROUNDING OF SERVICE

- Condition: Good: (XXX) Repairs Required ()
- Comments:

A handwritten signature in black ink, appearing to be 'M. J. ...', with the date '10/21/14' written below it.

7. GROUNDING OF EQUIPMENT

Condition: Good: (XXX)
Comments:

Repairs Required ()

8. SERVICE CONDUITS/RACEWAYS

Condition: Good: (XXX)
Comments:

Repairs Required ()

9. SERVICE CONDUCTORS AND CABLES

Condition: Good: (XXX)
Comments:

Repairs Required ()

10. TYPES OF WIRING METHODS

Condition:
Conduit Raceways: Good: (XXX)
Conduit PVC: Good: ()
NM Cable: Good: ()
BX Cable: Good: ()

Repairs Required ()
Repairs Required ()
Repairs Required ()
Repairs Required ()

11. FEEDER CONDUCTORS

Condition: Good: (XXX)
Comments:

Repairs Required ()

12. EMERGENCY LIGHTING

Condition: Good: (XXX)
Comments:

Repairs Required ()

13. BUILDING EGRESS ILLUMINATION

Condition: Good: (XXX)
Comments:

Repairs Required ()

14. FIRE ALARM SYSTEM

Condition: Good: (XXX)
Comments:

Repairs Required ()

15. SMOKE DETECTORS

Condition: Good: ()

Repairs Required (XXX)

Comments: Various smoke detectors were inoperable or missing.

16. EXIT LIGHTS

Condition: Good: (XXX)
Comments:

Repairs Required ()

17. EMERGENCY GENERATOR

Condition: Good: ()
Comments: Not present

Repairs Required ()

18. WIRING IN OPEN OR UNDER COVER PARKING GARAGE AREAS

Condition: Good: (XXX)
Comments:

Repairs Required ()

19. OPEN OR UNDERCOVER PARKING SURFACE AND SECURITY LIGHTING

Condition: Good: () Repairs Required (XXX)
Comments: Additional lighting has been installed. Engineer to perform photometric testing and resubmit results.

20. SWIMMING POOL WIRING

Condition: Good: ()
Comments: N/A

Repairs Required ()

21. WIRING OF MECHANICAL EQUIPMENT

Condition: Good: (XXX)
Comments:

Repairs Required ()

22. General Additional Comments

None



Handwritten signature and date: 10/21/14

40Year.com, Inc., Engineers

Professional Building Recertifications & Due-Diligence Inspections
Florida Registered Engineer, PE 59525

Building Official
The City of Coral Gables
City Hall, 405 Biltmore Way
Coral Gables, FL 33134

October 21, 2014

RE: Recertification Of Buildings – 40 Years Old or Older

Record Owner
Property Address
Folio #

**KRITCHMAN ENTERPRISES LTD
114 CALABRIA AVE
03-4108-009-0990**

Dear Sirs:

This letter shall serve to transmit the attached "MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR BUILDING'S STRUCTURAL & ELECTRICAL RECERTIFICATION" for the above referenced address which will provide an itemized description of the condition of the various components.

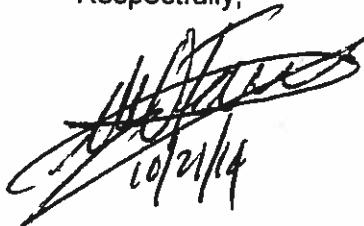
This inspection was completed on September 20, 2013.

I attest that this building cannot be recertified at this time pending remediation of defects identified in the attached report.

As a routine matter, in order to avoid any possible misunderstanding, nothing in this report should be construed directly or indirectly as a guarantee for any portion of the structure or electrical system. To the best of my knowledge and ability, this report represents an accurate appraisal of the present condition of the building based upon careful evaluation of observed conditions, to the extent reasonably possible. No warranty is either expressed or implied.

If you have any questions please call me at 305-665-2833.

Respectfully,



10/21/14

Marc O Touze, P.E.

40Year.com, Inc.

Brandon Shackelford

6731 SW 63 Court, Miami, Florida 33143

Telephone 305.665.2833 , Facsimile 305.665.2863

www.40year.com

**MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR
BUILDING'S STRUCTURAL RECERTIFICATION**

INSPECTION COMMENCED
DATE: September 20, 2013

INSPECTION MADE BY:

INSPECTION COMPLETED
DATE: September 20, 2013

SIGNATURE
PRINT NAME


Marc O Traze

TITLE: Professional Engineer
PE # 59525

ADDRESS: 6731 SW 63 Court
South Miami, FL 33143

Description of Structure

- a. Name of Title: KRITCHMAN ENTERPRISES LTD
b. Street Address: 114 CALABRIA AVE
c. Legal Description: 8 54 41
CORAL GABLES DOUGLAS SEC PB 25-69
LOTS 6-7 & 8 BLK 12
LOT SIZE IRREGULAR
OR 17793-2527 0997 01
d. Owners Name: KRITCHMAN ENTERPRISES LTD
e. Owner's Mailing Address: 200 S BISCAYNE BLVD 14TH FLR
MIAMI , FL 33131-2310
f. Folio Number of Building: 03-4108-009-0990
g. Building Code Occupancy
Classification: Group R-1 (Apartments)
h. Present Use: Apartments
i. General Description, Type of Construction, Size, Number of Stories, Special Features,
and Additional Comment:
Two story CBS structure. Hip roof. "U" plan. 12 Units with Interior entrances.
Approx. 8,574 sq. ft. adj.

Additions to Original Structure:
None apparent

**MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR
BUILDING'S STRUCTURAL RECERTIFICATION**

2. PRESENT CONDITION OF STRUCTURE

- a. General alignment (note good, fair, poor, explain if significant)
 - 1. Bulging Good condition
 - 2. Settlement Good condition
 - 3. Defections Good condition
 - 4. Expansion Good condition
 - 5. Contraction Good condition
- b. Portion distressed (Note, beams, columns, structural walls, floors, roofs, other)
None observed
- c. Surface conditions – describe general conditions of finishes, noting cracking, spalling, peeling, signs of moisture penetration & stains.
Good condition
- d. Cracks – note location in significant members. Identify crack size as HAIRLINE if barely discernible; FINE if less than 1 mm in width; MEDIUM if between 1 and 2 mm in width; WIDE if over 2 mm.
None observed
- e. General extent of deterioration – cracking or spalling of concrete or masonry; oxidation of metals; rot or borer attack in wood.
Good condition overall
- f. Previous patching or repairs
Normal maintenance
- g. Nature of present loading indicate residential, commercial, other; estimate magnitude.
Normal transient

3. INSPECTIONS

- a. Date of notice of required inspection
- b. Date(s) of actual inspection September 20, 2013
- c. Name and qualification of individual submitting inspection report:
Marc O Touze PE # 59525
- d. Description of any laboratory or other formal testing, if required, rather than manual or visual procedures:
None required
- e. Structural repair note appropriate line:
 - 1. None required XXXX
 - 2. Required (describe and indicate acceptance)

4. SUPPORTING DATA

- a. NA sheet written data
- b. NA photographs
- c. NA drawings or sketches



A handwritten signature in black ink, followed by the date 10/21/14.

5. MASONRY BEARING WALL, Indicate good, fair, poor condition:

- a. Concrete masonry units Good condition
- b. Clay tile or terra cotta units Good condition
- c. Reinforced concrete tie columns Good condition
- d. Reinforced concrete tie beams Good condition
- e. Lintel
- f. Other type bond beams
- g. Masonry finishes - exterior
 - 1. Stucco Good condition
 - 2. Veneer
 - 3. Paint only
 - 4. Other(describe)
- h. Masonry finishes - interior
 - 1. Vapor barrier
 - 2. Furring and plaster
 - 3. Paneling
 - 4. Paint only Good condition
 - 5. Other (describe)
- i. Cracks: None observed
 - 1. Location - note beams, columns, other
 - 2. Description
- j. Spalling: None observed
 - 1. Location - note beams, columns, other
 - 2. Description
- k. Rebar corrosion-check appropriate line:
 - 1. None visible XXXX
 - 2. Minor-patching will suffice
 - 3. Significant-but patching will suffice
 - 4. Significant-structural repairs required
- l. Samples chipped out for examination in spall areas:
 - 1. No
 - 2. Yes - describe color, texture, aggregate, quality


10/21/14

6. FLOOR AND ROOF SYSTEM

a. Roof:

1. Describe (flat, slope, type roofing, type roof deck, condition).

Sloped hipped. Tile over wood deck. Good condition.

2. Note water tanks, cooling towers, air conditioning equipment, signs, other heavy equipment and condition of support:

None

3. Note types of drains and scupper and condition:

Sheet flow Good condition.

b. Floor systems(s)

1. Describe (type of system framing, material, spans, condition)

1st Floor Concrete slab. And Conventional Wood Joists fair condition

2nd Conventional Wood Joists – Evidence of recent repairs. Fair condition.

Monitor and maintain as required.

c. Inspection – note exposed areas available for inspection, and where it was found necessary to open ceilings, etc. for inspection of typical framing members.

Adequate visibility

7. STEEL FRAMING SYSTEM

a. Description:

None observed

b. Exposed Steel - describe condition of paint & degree of corrosion:

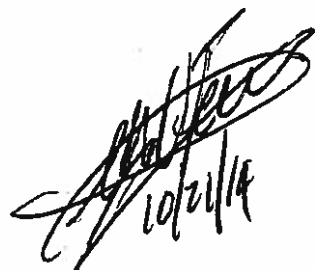
NA

c. Concrete or other fireproofing – note any cracking or spalling, and note where any covering was removed for inspection

NA

d. Elevator sheave beams & connections, and machine floor beams – note condition:

Hydraulic elevator


10/21/14

8. CONCRETE FRAMING SYSTEM

a. Full description of structural system

CBS on concrete spread footers with concrete tie beams/columns.

b. Cracking

1. Not significant XXXX
2. Location and description of members affected and type cracking

c. General condition

Good condition

d. Rebar corrosion - check appropriate line:

1. Non visible XXXX
2. Location and description of members affected and type cracking

3. Significant but patching will suffice

4. Significant - structural repairs required (describe)

e. Samples chipped out in spall areas:

1. No NA
2. Yes, describe color, texture, aggregate, general quality:

9. WINDOWS

a. Type (Wood, steel, aluminum, jalousie, single hung, double hung, casement, awning, pivoted, fixed, other)

Jalousie windows – Fair Condition

b. Anchorage – type & condition of fasteners and latches:

Good condition

c. Sealant – type of condition of perimeter sealant & at mullions:

Fair condition

d. Interiors seals – type & condition at operable vents:

NA

e. General condition:

Fair condition

10. WOOD FRAMING

a. Type – fully describe if mill construction, light construction, major spans, trusses;

Conventional Wood Floor and Roof Trusses and Rafters.

b. Metal fittings: angles, plates, bolts, split pintles, pintles, other, note condition:

None Observed

c. Joints – note if well fitted and still closed:

Good Condition

d. Drainage – note accumulations of moisture:

No Moisture Observed

e. Ventilation –note any concealed spaces not ventilated:

Adequate ventilation

f. Note any concealed spaces opened for inspection:

Access Port to Attic Space



Handwritten signature and date: 10/21/14

**MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR
BUILDING'S ELECTRICAL RECERTIFICATION**

INSPECTION COMMENCED
DATE: September 20, 2013

INSPECTION MADE BY:

SIGNATURE
PRINT NAME

Marc O Touze

INSPECTION COMPLETED
DATE: September 20, 2013

TITLE: Professional Engineer
PE # 59525

ADDRESS: 6731 SW 63 Court
South Miami, FL 33143

Description of Structure

a. Name of Title:

KRITCHMAN ENTERPRISES LTD

b. Street Address:

114 CALABRIA AVE

c. Legal Description:

8 54 41
CORAL GABLES DOUGLAS SEC PB 25-69
LOTS 6-7 & 8 BLK 12
LOT SIZE IRREGULAR
OR 17793-2527 0997 01

d. Owners Name:

KRITCHMAN ENTERPRISES LTD

e. Owner's Mailing Address:

200 S BISCAYNE BLVD 14TH FLR
MIAMI , FL 33131-2310

f. Folio Number of Building:

03-4108-009-0990

g. Building Code Occupancy

Group R-1 (Apartments)

Classification:

h. Present Use:

Apartments

i. General Description, Type of Construction, Size, Number of Stories, Special Features, and Additional Comment:

Two story CBS structure. Hip roof. "U" plan. 12 Units with Interior entrances.
Approx. 8,574 sq. ft. adj.

Additions to Original Structure:

None apparent

GUIDELINES AND INFORMATION FOR RECERTIFICATION OF ELECTRICAL SYSTEMS OF FORTY (40) YEAR STRUCTURES

1. ELECTRIC SERVICE

- 1. Size: Amperage (400) Fuses (XXX) Breakers ()
- 2. Phase: 3-Phase () 1-Phase (XXX)
- 3. Condition: Good (XXX) Fair () Needs Repair ()
- 4. Comments: Underground Service to exterior electrical room.
2 main disconnects: 2-200 A-fused.

2. METER AND ELECTRIC ROOM

- 1. Clearances: Good () Fair () Requires Correction (XXX)
- 2. Comments: CBS electric room. Stored material must be permanently removed

3. GUTTERS

- 1. Location: Good(XXX) Requires Repair ()
Line & Load
- 2. Taps and Fill: Good(XXX) Requires Repair ()
- 3. Comments:

4. ELECTRICAL PANELS

- 1. Panel # (1) Location: Electric room
Good(XXX) Needs Repair ()
- 2. Panel # (2-13) Location: Apartments
Good(XXX) Needs Repair ()
- 3. Panel # () Location:
Good() Needs Repair ()
- 4. Panel # () Location:
Good() Needs Repair ()
- 5. Panel # () Location:
Good() Needs Repair ()
- 6. Comments:
Good() Needs Repair ()

5. BRANCH CIRCUITS

- 1. Identified: Yes () Must be Identified (XXX)
- 2. Conductors: Good (XXX) Deteriorated() Must Replace ()
- 3. Comments:

6. GROUNDING OF SERVICE

- Condition: Good: (XXX) Repairs Required ()
- Comments:

Handwritten signature and date: 10/21/14

7. GROUNDING OF EQUIPMENT

Condition: Good: (XXX)

Comments:

Repairs Required ()

8. SERVICE CONDUITS/RACEWAYS

Condition: Good: (XXX)

Comments:

Repairs Required ()

9. SERVICE CONDUCTORS AND CABLES

Condition: Good: (XXX)

Comments:

Repairs Required ()

10. TYPES OF WIRING METHODS

Condition:

Conduit Raceways: Good: (XXX)

Conduit PVC: Good: ()

NM Cable: Good: ()

BX Cable: Good: ()

Repairs Required ()

Repairs Required ()

Repairs Required ()

Repairs Required ()

11. FEEDER CONDUCTORS

Condition: Good: (XXX)

Comments:

Repairs Required ()

12. EMERGENCY LIGHTING

Condition: Good: (XXX)

Comments:

Repairs Required ()

13. BUILDING EGRESS ILLUMINATION

Condition: Good: (XXX)

Comments:

Repairs Required ()

14. FIRE ALARM SYSTEM

Condition: Good: (XXX)

Comments:

Repairs Required ()

15. SMOKE DETECTORS

Condition: Good: ()

Comments: Various smoke detectors were inoperable or missing.

Repairs Required (XXX)

[Handwritten Signature]
10/21/14

16. EXIT LIGHTS

Condition: Good: (XXX)
Comments:

Repairs Required ()

17. EMERGENCY GENERATOR

Condition: Good: ()
Comments: Not present

Repairs Required ()

18. WIRING IN OPEN OR UNDER COVER PARKING GARAGE AREAS

Condition: Good: (XXX)
Comments:

Repairs Required ()

19. OPEN OR UNDERCOVER PARKING SURFACE AND SECURITY LIGHTING

Condition: Good: ()

Repairs Required (XXX)

Comments: Additional lighting has been installed. Engineer to perform photometric testing and resubmit results.

20. SWIMMING POOL WIRING

Condition: Good: ()
Comments: N/A

Repairs Required ()

21. WIRING OF MECHANICAL EQUIPMENT

Condition: Good: (XXX)
Comments:

Repairs Required ()

22. General Additional Comments

None

RC-15-01-0865

City of Coral Gables Building & Zoning Department		
Permit #: RC-15-01-0865		
Address: 114 Calabria AVE		
Approved		
Section	By	Date
HISTORICAL		
BOARD OR ARCH.		
BOARD OR ARCH.		
CONCURRENCY		
ZONING		
PLUMBING		
MECHANICAL		
ELECTRICAL		R 1/23/15
HANDICAP		
FEMA		
BUILDING		R
STRUCTURAL		
FIRE		
PUBLIC WORKS		
OWNER BUILDER		

Subject to compliance with all Federal, State, County and City rules and regulations. City assumes no responsibility for accuracy of or results from these plans.
 THIS COPY OF PLANS MUST BE AVAILABLE ON BUILDING SITE OR ARTISTS PERSONNEL WILL NOT BE MADE

Permit Action Report
CITY OF CORAL GABLES

pimPermitActions
9/10/2015 9:23:18AM

Permit #: RC-15-01-0865
Master permit #:

Permit type: rc010 - BUILDING RE CERTIFICATION
Routing queue: rc012 - STRUCTURE CERTIFICATION

Address: 114 CALABRIA AVE
CORAL GABLES, FL 33134

Group # - Name	Action Code	Action Description	Completion Date	Completion Code	Completed By	Comments
1 - BOARDS - GENERATE F	calc fees	CALCULATE FEES	1/21/2015	comp	arivera2	
2 - CASHIER	collect	COLLECT FEES	1/21/2015	comp	iwebuser	
3 - PLAN REVIEW	prbuild	BUILDING PLAN REVIEW	1/22/2015	reject	mlopez	REPAIRS NEEDED
3 - PLAN REVIEW	prbuild	BUILDING PLAN REVIEW	3/19/2015	apvd	mlopez	
3 - PLAN REVIEW	prelec	ELECTRICAL PLAN REVIEW	1/23/2015	reject	areyes	ELECTRICAL REPAIRS REQUIRED
3 - PLAN REVIEW	prelec	ELECTRICAL PLAN REVIEW	3/19/2015	reject	areyes	REPORT INDICATES IN ITEM # 19 - OPEN AND PARKING LIGHTING REQUIRES REPAIRS AND PHOTOMETRIC REPORT

4 - RE CERTIFIED LETTER letter GENERATE LETTER

CITY'S
EXHIBIT

5



The City of Coral Gables

Development Services Department
CITY HALL 405 BILTMORE WAY
CORAL GABLES, FLORIDA 33134

6/2/2015

KRITCHMAN ENTERPRISES LTD
200 S BISCAYNE BLVD 14TH FLR
MIAMI, FL 33131-2310

****FINAL NOTICE****

VIA CERTIFIED MAIL

91 7108 2133 3932 7095 9714

Re: Building Recertification
114 CALABRIA AVE
Folio # 03-4108-009-0990

Dear Property Owner:

In a certified letter dated 4/1/2014, this Department notified you the property referenced above requires a 40-year building recertification pursuant to Miami-Dade County Code, Chapter 8, Section 8-11(f). The letter informed you it was necessary to furnish this Department a report prepared by a licensed architect or engineer within 90-days specifying the building meets the requirements for building recertification provided under the Minimum Inspection Procedural Guidelines for Building Recertification.

Please be advised that as of 6/1/2015 the report will be overdue and this building will be deemed to be in NON-COMPLIANCE. This may result in the revocation of the Certificate of Occupancy, as well as, being subject to other penalties as provided in the Code.

Failure to contact us before 7/6/2015, will result in our forwarding this building information to the Miami-Dade County Unsafe Structures Board for further determination.

Please govern yourself accordingly.

Sincerely,

Manuel Z. Lopez

Manuel Z. Lopez, P.E.
Building Official

CITY'S

EXHIBIT

6

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

KRITCHMAN ENTERPRISES LTD
200 S BISCAYNE BLVD 14TH FLR
MIAMI, FL 33131-2310

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (transfer from service label) 91 7108 2133 3932 7095 9714

PS Form 3811, July 2013 Domestic Return Receipt



The City of Coral Gables

Development Services Department
CITY HALL 405 BILTMORE WAY
CORAL GABLES, FLORIDA 33134
CITY OF CORAL GABLES,

Case # 15-4253

Petitioner,

vs.

KRITCHMAN ENTERPRISES, LTD.
a Florida limited partnership

Respondents.

**NOTICE OF UNSAFE STRUCTURE VIOLATION FOR
FAILURE TO RECERTIFY AND NOTICE OF HEARING**

Date: August 31, 2015

To:

<p><u>Owner</u> Kritchman Enterprises, Ltd. 2525 Ponce de Leon Boulevard Suite 600 Coral Gables, FL 33134-6045</p> <p>Return receipt number: 91 7108 2133 3932 6255 5795</p>	<p><u>Owner (Registered Agent)</u> Kritchman Enterprises, Ltd. c/o Dan P. Heller, Esq. Registered Agent Heller Waldman P.L. 3250 Mary Street Suite 102 Coconut Grove, FL 33133-5232</p> <p>Return receipt number: 91 7108 2133 3932 6255 5801</p>
---	--

Re: The two-story apartment building ("Structure"), built in 1954, located at 114 Calabria Avenue, Coral Gables, FL 33134-6045, legally described as Lots 6, 7 and 8, Block 12, of DOUGLAS SECTION OF CORAL GABLES, according to the Plat thereof, as recorded in Plat Book 25, Page 69, of the Public Records of Miami-Dade County, Florida ("Property").

CITY'S

EXHIBIT 7

The City of Coral Gables ("City") Building Official has inspected the records relating to the Structure in accordance with Article III, Chapter 105 of the City Code, pertaining to unsafe structures, and Section 8-11 of the Miami-Dade County Code, as applicable in the City, pertaining to existing buildings. The Structure is hereby declared unsafe by the Building Official and is presumed unsafe pursuant to Section 105-186(j)(13) of the City Code for failure to timely comply with the maintenance and recertification requirements of the Florida Building Code or Section 8-11 of the Miami-Dade County Code as follows:

On April 1, 2014, the City sent the Property Owner a 90-day Notice of Required Inspection requesting an inspection report conforming to the minimum inspection procedural guidelines as issued by the Miami-Dade County Board of Rules and Appeals, pursuant to Section 8-11(f) of the Miami-Dade County Code ("Report").

The Report, submitted to the City on October 21, 2014, stated that the Structure did not meet the minimum requirements to be recertified as structurally and electrically safe. The Report noted that the following items required repair or modification: **Electrical:** 1) meter and electric room storage must be permanently removed; 2) branch circuits must be identified; 3) various smoke detectors are inoperable or missing; and 4) engineer must perform photometric testing on parking and security lighting.

On January 23, 2015, the City notified the Owner that it must complete the repairs and submit a letter from the architect or engineer who prepared the Report stating that the Structure now meets the minimum requirements ("Compliance Report").

To date, the Owner has not completed the required repairs and has not submitted a Compliance Report ("Required Action").

Therefore, this matter is set for hearing before the City's Construction Regulation Board ("Board") in the Commission Chambers, City Hall, 405 Biltmore Way, Coral Gables, Florida 33134, on September 14, 2015, at 2:00 p.m.


You may appeal the decision of the Building Official to the Board by appearing at the hearing. You have the right to be represented by an attorney and may present and question witnesses and evidence, however, formal rules of evidence shall not apply. Failure to appear at the hearing will result in the matter being heard in your absence. Please be advised that, if someone other than an attorney will be attending the hearing on your behalf, he or she must provide a power of attorney from you at the time of the hearing. Requests for continuance must be made in writing to Belkys Garcia, Secretary to the Board, at City of Coral Gables, Development Services Department, 405 Biltmore Way, 3rd Floor, Coral Gables, FL 33134, bgarcia@coralgables.com, tel: (305) 460-5229.

If the Required Action is not completed before the above hearing date, the Building Official may order that the structure be vacated, boarded, secured, and posted to prevent further occupancy until the Required Action is completed. The Building Official may also order demolition of the Structure and recover the costs incurred against the Property and the Owner of record.

If the Property Owner or other interested party does not take all Required Action or appeal the decision to the Building Official, the Construction Regulation Board may enter an order of demolition and assess all costs of the proceedings and demolition and other Required Action for which the City shall have a lien against the Property and the Property Owner.

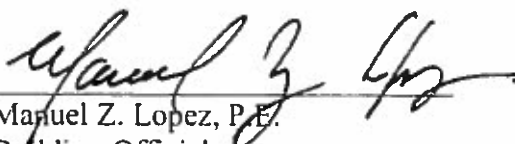
Please address any questions to Virginia Goizueta, Building Services Coordinator, tel: (305) 460-5250, or Manuel Z. Lopez, P.E., Building Official, tel: (305) 460-5242, Monday through Friday, 7:30 a.m. to 3:30 p.m.

Please govern yourself accordingly.


Manuel Z. Lopez, P.E.
Building Official

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that, on August 31, 2015, a true and correct copy of the foregoing notice was served via certified mail, return receipt requested, on all of the parties listed above and by hand delivery or posting at the Property.


Manuel Z. Lopez, P.E.
Building Official

NOTICES

Any person who acts as a lobbyist pursuant to the City of Coral Gables Ordinance No. 2006 -11, must register with the City Clerk prior to engaging in lobbying activities before the city staff, boards, committees and/or the City Commission. A copy of the Ordinance is available in the Office of the City Clerk, City Hall.

Pursuant to Section 286.0105, Florida Statutes, if a person decides to appeal any decision made by the Board, with respect to any matter considered at such hearing or meeting, he or she will need a record of the proceedings, and that, for such purpose, he or she may need to ensure that a verbatim record of the proceedings is made; which record includes the testimony and evidence upon which the appeal is to be based. Although a court reporter usually attends the hearing at the City's cost, the City is not required to provide a transcript of the hearing, which the Respondent may request at the Respondent's cost.

ADA Assistance: The City complies with the provisions of the American with Disabilities Act. Individuals with disabilities requiring special accommodations or assistance should contact Ernesto Pino, Assistant Public Works Director, at (305) 460-5004, with requests for auxiliary aids or services at least one business day before the hearing in order to request such assistance.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Kritchman Enterprises, Ltd
 2525 Ponce de Leon Blvd
 # 600
 Coral Gables, Florida 33134



2. Article Number (Transfer from service label)
 9171082133393262555795

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Susana S. 9/4/15

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Kritchman Enterprises, Ltd
 c/o Dan P. Heller, Esq.
 Heller Waldman P.L.
 3250 Mary St #102
 Coconut Grove, FL 33133



2. Article Number (Transfer from service label)
 9171082133393262555801

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 LIAN SIRVEN 9/11/15

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt



CITY OF CORAL GABLES
DEVELOPMENT SERVICES DEPARTMENT
Affidavit of Posting

Complaint/Case #: 15-4253

Title of Document Posted: Construction Regulation Board Case

I, JOSE PAZ, DO HEREBY SWEAR/AFFIRM THAT
THE AFOREMENTIONED NOTICE WAS PERSONALLY POSTED, BY ME, AT THE
ADDRESS OF 114 CALABRIA AV., ON 9-1-15
AT 9:15 AM.

JOSE PAZ
Employee's Printed Name

[Signature]
Employee's Signature

STATE OF FLORIDA)
ss.
COUNTY OF MIAMI-DADE)

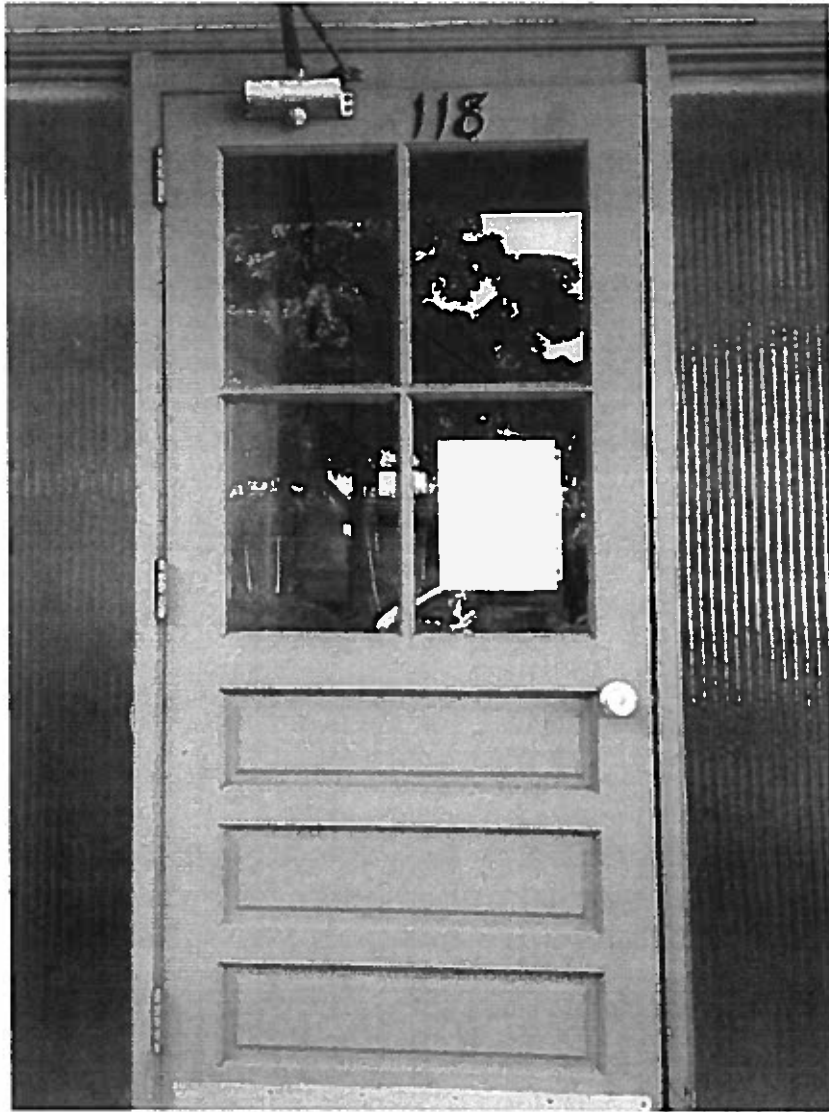
Sworn to (or affirmed) and subscribed before me this 1st day of September, in the
year 2015, by JOSE PAZ who is personally known to me
or has produced _____ as identification.

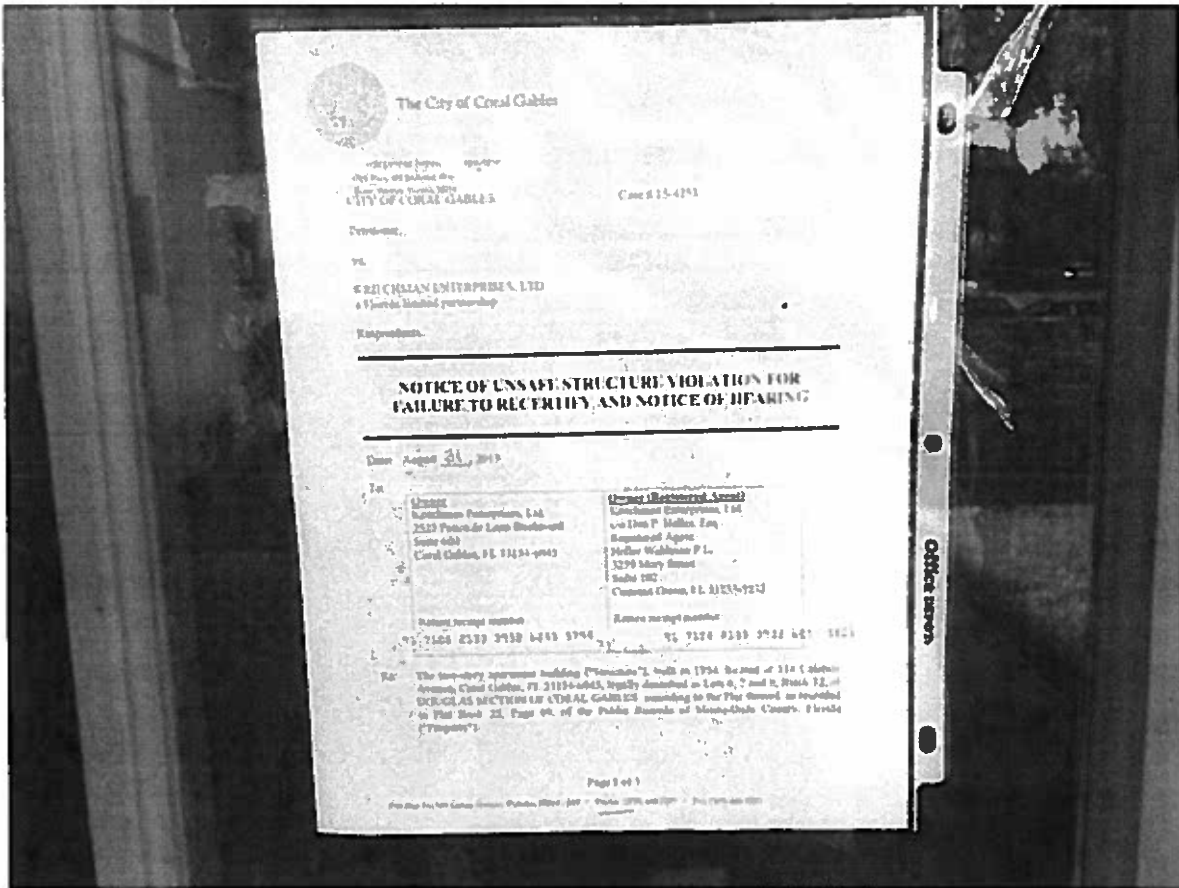
My Commission Expires:



Belkys Garcia
Notary Public

114 Calabria Ave





OFF. REC: 1779302527

97R4228 18 1997 SEP 17 12:28

Reim in: (enclose self-addressed stamped envelope)

Dan P. Heller, Esquire
Ruden, McClosky, et al

Address:

701 Brickell Ave., Suite 1900
Miami, Florida 33131

DOCSTPDEE 3,174.60 SURTX 2,380.95
HARVEY RUVIN, CLERK DADE COUNTY, FL

This Instrument Prepared by:

Dan P. Heller, Esquire
Ruden, McClosky, et al

Address:

701 Brickell Ave., Suite 1900
Miami, Florida 33131

SPACE ABOVE THIS LINE FOR PROCESSING DATA—SPACE ABOVE THIS LINE FOR RECORDING DATA—

Folio No: 03 4108 009 0990

This Quit-Claim Deed, Executed this 3 day of Sept, 1997 by MORRIS KRITCHMAN, AS TRUSTEE OF THE MORRIS KRITCHMAN TRUST DATED DECEMBER 11, 1989, with full power and authority either to protect, conserve and to sell, or to lease, or to encumber, or otherwise to manage and dispose of the hereinbelow described property, whose mailing address is : 1210 Alfonso Avenue, Coral Gables, Florida 33146 first party, to KRITCHMAN ENTERPRISES, LTD., a Florida limited partnership, whose post office address is c/o First Union National Bank of Florida, Attention: Kimberly Smith, 200 South Biscayne Boulevard, Miami, Florida, 33131 second party:

(Wherever used herein the terms "first party" and "second party" shall include singular and plural, heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires)

Witnesseth: That the said first party, for and in consideration of the sum of \$10.00 and other good and valuable consideration, in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quit-claim unto the said second party forever, all the right, title, interest, claim and demand which the said first party has in and to the following described lot, piece or parcel of land, situate, lying and being in the County of Dade in the State of Florida, to wit:

Lots 6, 7 and 8, Block 12, of DOUGLAS SECTION OF CORAL GABLES, according to the Plat thereof, as recorded in Plat Book 25, at Page 69, of the Public Records of Dade County, Florida.

To Have and to Hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity, to the only proper use, benefit and behalf of the said second party forever.

459,045.00
3,174.60
2,380.95
15.00

NIA:30846.1

KR39179-1



EXHIBIT

8

In Witness Whereof, the said first party has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in presence of:

[Signature]
Print Name: Kimberly Smith

[Signature]
Print Name: KIMBERLY SMITH

Morris Kritchman, as Trustee of the Morris Kritchman Trust dated December 11, 1989

By: [Signature]

MORRIS KRITCHMAN
Kimberly Smith, 200 So. Biscayne Blvd.,
First Union National Bank of Florida
Miami, Florida 33131

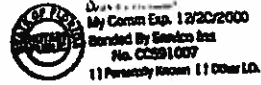
STATE OF FLORIDA)
COUNTY OF DADE)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared MORRIS KRITCHMAN, as Trustee of the Morris Kritchman Trust dated December 11, 1989, (who is personally known to me or who has produced N/A as identification.

WITNESS my hand and official seal in the County and State last aforesaid this 3 day of Sept, 1997.

My Commission Expires:

[Signature]
Notary Signature, State of Florida
Don P. Helzer
Printed Notary Signature



RECORDED IN OFFICIAL RECORDS BOOK
OF DADE COUNTY, FLORIDA
RECORD NUMBER
HARVEY RUVIN
CLERK CIRCUIT COURT



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS[Home](#)[Contact Us](#)[E-Filing Services](#)[Document Searches](#)[Forms](#)[Help](#)

Detail by Entity Name

Florida Limited Partnership

KRITCHMAN ENTERPRISES, LTD.

Filing Information

Document Number	A97000002037
FE/EIN Number	65-0833479
Date Filed	09/17/1997
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	10/19/1998
Event Effective Date	NONE

Principal Address

2525 Ponce de Leon Boulevard
Suite 600
Coral Gables, FL 33134

Changed: 05/20/2013

Mailing Address

2525 Ponce de Leon Boulevard
Suite 600
Coral Gables, FL 33134

Changed: 05/20/2013

Registered Agent Name & Address

HELLER, DAN PESQ
% HELLER WALDMAN P.L.
3250 MARY STREET SUITE 102
COCONUT GROVE, FL 33133

Address Changed: 06/25/2009

General Partner Detail

Name & Address

Document Number P98000018887

[Copyright © and Privacy Policies](#)

State of Florida, Department of State

Suite 600
Coral Gables, FL 33134

Annual Reports

Report Year	Filed Date
2013	05/20/2013
2014	01/15/2014
2015	01/21/2015

Document Images

01/21/2015 -- ANNUAL REPORT	View image in PDF format
01/15/2014 -- ANNUAL REPORT	View image in PDF format
05/20/2013 -- ANNUAL REPORT	View image in PDF format
04/30/2012 -- ANNUAL REPORT	View image in PDF format
03/08/2011 -- ANNUAL REPORT	View image in PDF format
03/31/2010 -- ANNUAL REPORT	View image in PDF format
06/25/2009 -- ANNUAL REPORT	View image in PDF format
02/21/2008 -- ANNUAL REPORT	View image in PDF format
01/24/2007 -- ANNUAL REPORT	View image in PDF format
04/24/2006 -- ANNUAL REPORT	View image in PDF format
02/15/2005 -- ANNUAL REPORT	View image in PDF format
08/12/2004 -- ANNUAL REPORT	View image in PDF format
07/25/2003 -- ANNUAL REPORT	View image in PDF format
02/19/2002 -- ANNUAL REPORT	View image in PDF format
05/01/2001 -- ANNUAL REPORT	View image in PDF format
03/23/2000 -- ANNUAL REPORT	View image in PDF format
12/29/1998 -- ANNUAL REPORT	View image in PDF format
10/19/1998 -- Amendment	View image in PDF format
06/12/1998 -- REINSTATEMENT	View image in PDF format



**PROFESSIONAL
MANAGEMENT, INC.**

9095 Southwest 87th Avenue · Suite 777 · Miami, FL 33176 · Phone (305) 270-0870 · Fax (305) 279-5703

OK

October 14th, 2014

City of Coral Gables
Building and Zoning Dept.
405 Biltmore Way
Coral Gables, FL 33134

RE: Extension request for Building Recertification
Folio#: 03-4108-009-0990
Address: 114 Calabria Ave
Coral Gables, FL 33134

Dear Mr. Manuel Z. Lopez P.E.:

Please accept this letter as a formal request for a ninety (90) day extension period in order to complete the Recertification Report requested for Kritchman Enterprises, LTD D/B/A Coral Hall Apartments.

Thank you in advance for your attention to this request and if you have any questions or require further information, please do not hesitate to contact us at (305) 270-0870.

Sincerely,

Robert Bush,
District Manager with Professional Management Inc.
As agent for Kritchman Enterprises, LTD d/b/a Coral Hall Apartments

CC: Cristina Coronel, Regional Manager

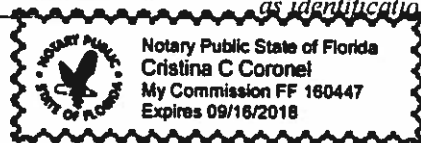
CITY'S

EXHIBIT 9

State of FLORIDA
County of MIAMI-DADE

The foregoing instrument was acknowledged before me this 14th day of October, 2014, by Robert Bush
Who is personally known to me or produced _____ as identification

9/10/2018 NOTARY PUBLIC
Commission Expires:



Silio, Antonio

From: Lopez, Manuel
Sent: Tuesday, October 21, 2014 12:45 PM
To: 'Cristina Coronel'; Silio, Antonio
Cc: Kritchman Enterprises
Subject: RE: Extension request for Building Recertification - 2nd Attempt

Tony, if this is not one of the buildings we are taking to the Board please grant them the extension.

From: Cristina Coronel [<mailto:cristinac@pmiflorida.com>]
Sent: Tuesday, October 21, 2014 9:15 AM
To: Lopez, Manuel; Silio, Antonio
Cc: Kritchman Enterprises
Subject: RE: Extension request for Building Recertification - 2nd Attempt
Importance: High

Dear Mr. Manuel Z. Lopez P.E.:

Please accept the attached letter serve as a formal request for a ninety (90) day extension period in order to complete the Recertification Report requested for Kritchman Enterprises, LTD D/B/A Coral Hall Apartments.

Folio#: 03-4108-009-0990
Address: 114 Calabria Ave
Coral Gables, FL 33134

An original copy of the letter was hand delivered to your office today. Please let us know if the request has been granted.

Thank you in advance for your attention to this request and if you have any questions or require further information, please do not hesitate to contact us at (305) 270-0870.

Thank you,

Cristina Coronel

Regional Manager



**Professional
PMI Management, Inc.**

9095 SW 87th Avenue
Suite # 777
Miami, Florida 33176

☎ (305) 270-0870

☎ (305) 279-5703

e-✉ cristinac@PMIFlorida.com

Visit our website at <http://www.pmiflorida.com>

♻️ please consider the environment before printing this email

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