## 2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2004

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SIGNATURE: By:

## Apr 07, 2004 08:00 AM Secretary of State DOCUMENT # A0000001199 1. Entity Name SAPP INVESTMENTS LIMITED PARTNERSHIP Principal Place of Business Mailing Address C/O DORIS KANE 319 MARSHALL STREET KENNETT SQUARE PA 19348 C/O MORRIS ENGELBERG, ESQ. 3230 STIRLING ROAD #1 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #, etc. CR2E003 (11/03) City & State 4. FEI Number City & State Applied For 65-1027107 Not Applicable Zφ Country Ziρ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ENGELBERG, MORRIS ESQ. 3230 STIRLING ROAD SUITE 1 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 City Zin Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$1,000,000.00 as Shown on record. in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 12. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY DOCUMENT # P00000072115 STREET ADDRESS SAPP INVESTMENTS, INC. NAME STREET ADDRESS 3230 STIRLING ROAD SUITE 1 CITY-ST-ZIP 000000111612 CITY - ST - ZIP HOLLYWOOD FL 33021 <del>04/13/04-80026-012-526.2</del>5 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-SE-ZIP CITY-ST-ZIP SOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS City-St-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS MAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-789 14. Thereby 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes SAPP INVESTMENTS, INC., GENERAL PARTNER

Doris Kane, Pres.

**FILED**