2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

DOCUMENT # A0200000785 1. Entity Name HOME STONE LIMITED PARTNERSHIP						FILE MAY-b F		2
Principal Place of Business Mailing Address								
11737 N.W: 5TH STREET 2665 SOUTH BAYSHORE PLANTATION, FL 33325 MIAMI, FL 33014			DRIVE	, Suite 703	SEC TALL	RETARY OF AHASSEE, I	STATE FLORID	
2. Principal Pl	ace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04282004	Chg-LP	CR2E00	03 (10/03)	
City & State		City & State			4. FEI Number 02-0613			Applied For Not Applicable
Zip	Country	Zip	Count	try		of Status Desired		8.75 Additional ee Required
	6. Name and Address of Current	Registered Agent		Nama	7. Name and	Address of New R	egistered A	gent
WORLD C	ORPORATE SERVICES, INC.	Name Mitchell S. Polansky, Esq.						
2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI8, FL 33133				Street Address (1 2665	P.O. Box Numbe S. Baysl	r is Not Acceptable nore Drive) e , Suit	e 703
				City				Zip Code
				Miam			FL	33133
8. The above the obligati	namen entity submits dis statement to ons of legistered agent. Mitchell 15 Polansky	the purpose of changing its re	egistere	ed office or register $4/28$	_	ı, in the State of Flo	orida. I am fa	amiliar with, and accept
SIGNATURE -	Synature typed or plinted name of registered agence	4/20	704		DATE			
9. Capital Co as Shown	htributions \$1,000.00	. 10. Amount of Capital in FLORIDA to dat		outions				141:35
********	A GENERAL PARTNER	HAT IS A BUSINESS ENT	ITY M	UST BE REGIST	FERED AND A	CTIVE WITH TH	IS OFFICE	ाइसपुर च
12.	NOTE: General Partners MA		e form	; an amendmen	t must be file	ADDRESS CHA		
DOCUMENT #	L02000012679		1	ET ADDRESS				f .
NAME STREET ADDRESS	HOME VISION MANAGEMENT L 11737 N.W. 5TH STREET	rc	}					
CHY-ST-ZIP	PLANTATION, FL 33325		CITY	-ST-ZIP			a^{j_k} .	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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14. I hereby indicated the received	certify that the information supplied will on this report is true and accurate size or trustee empowered to execute the Mitchell S	this filing does not quality for the my signature shall have to separt as required by Chapt Polansky	the exe he sam er 620,), Florida Statutes. that I am a Genera 3		tify, that the information the limited partnership or
SIGNAT	URE: ///	AXX			1/04 (305			
<u></u> .	SIGNATURE AND TYPED OF	PRINTED NAME OF SIGNING GENERA	L PARTN	ER		Date	D .	aytime Phone #