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

DOCUMENT # A03000000993

1. Entity Name
ALAM FAMILY LLLP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 FEB 16 AM 10: 24

LR 02/27/04

Principal Place of Business	Mailing Address
15020 SOUTHWEST 74TH AVENUE MIAMI FL 33158-2123	15020 SOUTHWEST 74TH AVENUE MIAMI FL 33158-2123

MOORE CR2E003 (11/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 20-0083601 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ALAM, NASIR M
15020 SOUTHWEST 74TH AVENUE
MIAMI FL 33158-2123

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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] NASIR M. ALAM 1/21/04
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. $1,000,000.00

10. Amount of Capital Contributions in FLORIDA to date. 1,000,000

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L03000025110	STREET ADDRESS	
NAME	ALAM MANAGEMENT, LLC		
STREET ADDRESS	15020 SOUTHWEST 74TH AVENUE	CITY-ST-ZIP	900029794919
CITY-ST-ZIP	MIAMI FL 33158-2123		03/03/04--01029--021 **535.00
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STAPLE CHECK HERE

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 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

SIGNATURE: [signature] NASIR M. ALAM, Managing Member of Alam Management, LLC. 1/21/04 (305)669-2700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #