2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

1. Entity Na	me	# A030 (DCIATES, L		4		FILED 04 JAN 29 AM 9: 27 SECRETARY OF STATE TALLAHASSEE FLORIDA					
1450 MADI	Principal Place of Business 1450 MADRUGA AVE., STE. 303 CORAL GABLES, FL 33146 Mailing Address 1450 MADRUGA AVE., STE. 303 CORAL GABLES, FL 33146							TALLAHA	ŠSEE FLO	RIDA	
2. Principal	2. Principal Place of Business 3. Mailing Address										
Suite, Ap	Suite, Apt. #, etc.			Suite, Apt. #, etc.			01222004	Chg-LP	CR2E003	(10/03)	
City & St	ate	5118c		City & State			4. FEI Number	80-00	77023	Applied For Not Applicable	
Zip	Zip Country			Zip Country			5. Certificate o	f Status Desired		.75 Additional	
•	6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name				
	EBIN, LINDA ESQ										
825 BRIC	COBB & EBIN P.A. 825 BRICKELL BAY DR, STE 1648 MIAMI, FL 33131-2920					Street Address (P.O. Box Number is Not Acceptable)					
IVIIAIVII, E	L 33131-2	920		٠		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, a the obligations of registered agent.										iliar with, and accept	
SIGNATURE											
	Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions as Shown on record. \$2,150,000.00 10. Amount of Capital Contributions in FLORIDA to date.							:	DATE		
	A (GENERAL PAI	RTNER THAT	IS A BUSINESS EI	NTITY M	UST BE REGIS	TERED AND AC	TIVE WITH T	HIS OFFICE.		
12.								ADDRESS CHANGES ONLY			
DOCUMENT # NAME	P03000094607 AC OFFICE CORP.					ET ADDRESS	·				
STREET ADDRESS		DRUGA AVE., SABLES, FL 3:			CITY	-ST-ZIP		•			
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DOCUMENT # NAME					STRI	ET ADDRESS		10132 7 1040107	12016)	**526.25	
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	5		•		CITY	-ST-ZIP					
DOCUMENT#		-			STR	EET ADDRESS					
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indicate	d on this repo	ort is true and acc	curate and that r	iling does not qualify for ny signature shall have ort as required by Cha	the sam	e legal effect as if r	ection 119.07(3)(i), nade under oath; i	, Florida Statutes that I am a Gene	. I further certify the rail Partner of the	that the information limited partnership or	
SIGNA	TURE:	SIGNATURE A	MC TYPED OR PRINT	ED NAME OF SIGNING GENE	RAL PARTI	ER		/23/04 Date	305)662	2 - 68 40 is Phone #	