


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 #205
 05 APR -1 AM 10:01

DOCUMENT # A0400000234

1. Entity Name
 800 WEST LOOP HOUSTON, LTD.



Principal Place of Business
 C/O EASTON & ASSOCIATES, INC
 10165 NW 19TH ST
 MIAMI, FL 33172

Mailing Address
 C/O EASTON & ASSOCIATES, INC
 10165 NW 19TH ST
 MIAMI, FL 33172

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

03222005 Chg-LP CR2E003 (10/03)



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

4. FEI Number Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EASTON, EDWIN J
 C/O EASTON & ASSOCIATES, INC
 10165 NW 19TH ST
 MIAMI, FL 33172

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$4,900,000.00

10. Amount of Capital Contributions in FLORIDA to date.

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	
DOCUMENT #	L04000011900
NAME	1800 WEST LOOP EWE/HOUSTON, LLC
STREET ADDRESS	10165 NW 19TH ST
CITY-ST-ZIP	MIAMI, FL 33172
DOCUMENT #	L04000020131
NAME	JMP 1800 WEST LOOP, LLC
STREET ADDRESS	2828 CORAL WAY, PENTHOUSE SUITE
CITY-ST-ZIP	MIAMI, FL 33145
DOCUMENT #	F01000004320
NAME	COBB NEVADA PARTNERS, INC.
STREET ADDRESS	225 ARAGON AVENUE, SUITE 333
CITY-ST-ZIP	CORAL GABLES, FL 33134
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	700050092317
CITY-ST-ZIP	04/07/05--01005--014 **\$35.00
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

STAPLE CHECK HERE

11. 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: EDWARD W. EASTON *[Signature]* 305-593-2222 03/23/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #