2005 LIMITED PARTNERSHIP ANNUAL REPORT

FILED Due By May 1, 2005 2005 APR 21 PM 2: 12 DOCUMENT # A0400001147 1. Entity Name 851 RETAIL, LLLP SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 2828 CORAL WAY, PENTHOUSE SUITE 2828 CORAL WAY, PENTHOUSE SUITE . MIAMI, FL 33145 MIAMI, FL 33145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02142005 Chg-LP CR2E003 (10/03) City & State City & State Applied For 4. FEI Number Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HERNANDEZ, ANGEL Street Address (P.O. Box Number is Not Acceptable) 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145 City Zip Code FL 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, typed or printed name of registered agent and title if applicable. DATE 9. Capital Contributions 10. Amount of Capital Contributions \$99.90 as Shown on record. 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY P04000103331 DOCUMENT # STREET ADDRESS NAME 851 RETAIL, INC. 2828 CORAL WAY, PENTHOUSE SUITE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33145 DOCUMENT # STREET ADDRESS NAME 400054201344 05/10/05--01031--002 **150,00 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT / STREET ADDRESS NAME STREET ADDRESS CITY+ST-7IP CITY-ST-ZIP

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 ChapANGEL*HERNANDEZ

SIGNATURE:

CHECK HERE

STAPLE

D OR PRINTED NAME OF SIGNING GENERAL PARTNER

VICE-PRESIDENT