. . 2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005....

SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # A04000001481 05 JUN -6 AH 9: 54 CAMACHO INVESTMENTS, LTD. Mailing Address Principal Place of Business 7500 SW 8TH STREET 7500 SW 8TH STREET SUITE 302 SUITE 302 MIAMI, FL 33144 MIAMI, FL 33144 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01112005 Chg-LP CR2E003 (10/03) Applied For 4. FEI Number City & State City & State Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAMACHO, MANUEL F JR. Street Address (P.O. Box Number is Not Acceptable) 7500 SW 8TH STREET SUITE 302 MIAMI, FL 33144 City 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, typed or printed name of registered agent and title if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$990.00 in FLORIDA to date. as Shown on record. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 13. 12. L04000067515 DOCUMENT # STREET ADDRESS NAME CAMACHO MANAGEMENT, LLC 7500 SW 8TH STREET, SUITE 302 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33144 CITY-ST-ZIP 400055333364 DOCUMENT # STREET ADDRESS 06/21/05--01013--001 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS **88.75 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS STAPLE CHECK NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME # STREET ADDRESS CITY-ST-ZIP CITY-S-ZIP 14. Thereby 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 this receiver or trustee empowered to execute this report as required by Chapter 620. Florida Statutes

MANUEL F. MANUEL SIGNATURE: SIGNATURE AND TYPE

FILEU