


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Jan 28, 2005 08:00 AM
Secretary of State

DOCUMENT # A21669 1. Entity Name 330 BISCAYNE, LTD.					
Principal Place of Business 121 ALHAMBRA PLAZA, PH I, SUITE 1600 CORAL GABLES, FL 33134			Mailing Address 121 ALHAMBRA PLAZA, PH I, SUITE 1600 CORAL GABLES, FL 33134		
2. Principal Place of Business Suite, Apt. #, etc			3. Mailing Address Suite, Apt. #, etc		
City & State			City & State		
Zip		Country		4. FEI Number 59-2632351	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RENTZ, R. LARRY 121 ALHAMBRA PLAZA, PH I, SUITE 1600 CORAL GABLES, FL 33134			7. Name and Address of New Registered Agent Name Street Address (P O. Box Number is Not Acceptable) City		
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.			Applied For Not Applicable		
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$1,000.00			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			13. ADDRESS CHANGES ONLY		
DOCUMENT # L72591 NAME 330 BISCAYNE REALTY, INC. STREET ADDRESS 121 ALHAMBRA PLAZA, PH I, SUITE 1600 CITY-ST-ZIP CORAL GABLES, FL 33134			STREET ADDRESS CITY-ST-ZIP 01/28/05-80100-019 141.25		
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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: <u>Yazmin Gil</u> YAZMIN GIL, TREASURER 1/13/05 305-443-1000 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					

STAPLE CHECK HERE