ZOOS LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

SIGNATURE:

FILED DOCUMENT # A9300000014 Feb 28, 2005 08:00 AN 1. Entity Name DJRK, LTD. **Secretary of State** Mailing Address Principal Place of Business 823 BAYSHORE BLVD. PO BOX 1008 TAMPA, FL 33606 TAMPA, FL 33601-1008 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 02232005 Chg-LP CR2E003 (10/03) City & State 4. FEI Number Applied For City & State 59-3157741 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KING, RODGER B Street Address (P.O. Box Number is Not Acceptable) 823 BAYSHORE BLVD. TAMPA, FL 33606 Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE 10. Amount of Capital Contributions 9. Capital Contributions \$160,000.00 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. GENERAL PARTNER INFORMATION 13. 12. COCUMENT# STREET ADDRESS NAME KING, RODGER B STREET ADDRESS 823 BAYSHORE BLVD. City ST 71P CITY-ST-ZIP **TAMPA, FL 33606** Hills Silles DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY ST 7/2 DOCUMENT# STREET ADORESS NAME STREET ADDRESS CITY-ST-7IP CITY ST-ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY ST 78P DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY ST ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY ST-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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes