2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2004

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SIGNATURE: / Theres

SONATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Apr 26, 2004 08:00 AM Secretary of State DOCUMENT # A95000000796 1. Entity Name GREEN ASSET MANAGEMENT, LTD. Principal Place of Business Mailing Address 9155 S. DADELAND BLVD., SUITE 1812 9155 S. DADELAND BLVD., SUITE 1812 MIAMI FL 33156 MIAMI FL 33156 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. CR2E003 (11/03) City & State City & State 4. FEI Number Applied For 65-0582912 Not Applicable Zφ Country Ζŧρ 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 Name GREEN, ELIZABETH A ESQ Street Address (P.O. Box Number is Not Acceptable) 9155 SOUTH DADELAND BLVD. **SUITE 1812 MIAMI FL 33156** 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 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$3,000,000,00 in FLORIDA to date. \$ 3,000,000,00 SEE REVERSE SIDE FOR FEE INFORMATION 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 ADDRESS CHANGES ONLY 12. 13. DOCUMENT 4 STREET ADDRESS GREEN, HERSCHEL V NAME 9155 S. DADELAND BLVD, SUITE 1812 STREET ADDRESS CITY-ST-ZIP CITY ST. ZIP MIAMI FL 33156 SOCIMENT A STREET ADDRESS NAME GREEN, NANCY STREET ADDRESS 9155 S. DADELAND BLVD., SUITE 1812 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33156 U00000145762 DOCUMENT # STREET ADDRESS 05/03/04-80039-004 526.25 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CATY-ST-ZIP DOCUMENT # STREET ADORESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CSTY-ST-78P 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

FILED

4/19/04 (305)670-1000