


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Jun 01, 2004 08:00 AM
Secretary of State

DOCUMENT # A96000001382			
1. Entity Name NANEL HOLDINGS, LTD.			
Principal Place of Business 3 GROVE ISLAND DRIVE, SUITE 1604 MIAMI, FL 33133		Mailing Address 3 GROVE ISLAND DRIVE, SUITE 1604 MIAMI, FL 33133	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
NELSON, BARRY A NELSON & LEVINE, P.A. 2775 SUNNY ISLES BLVD., SUITE 118 NORTH MIAMI BEACH, FL 33160		Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
9. Capital Contributions as Shown on record. \$475,000.00		10. Amount of Capital Contributions in FLORIDA to date. \$ 475,000.00	
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 #	P96000053015	STREET ADDRESS	
NAME	NANEL HOLDINGS CORP.	CITY-ST-ZIP	
STREET ADDRESS	3 GROVE ISLAND DRIVE, SUITE 1604	STREET ADDRESS	U00000162056
CITY-ST-ZIP	MIAMI, FL 33133	CITY-ST-ZIP	06/03/04-20006-018 526.25
DOCUMENT #		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
15. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.071(3)(f), 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 520, Florida Statutes.			
SIGNATURE: <i>Ellen R. Roth</i> ELLEN R. ROTH		Date	6-19-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date	305.536.7293



04192004 Chg-LP CR2E003 (10/03)

4. FEI Number **65-0879735** Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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