

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

DOCUMENT # A96000001993
1. Entity Name
KENDALL COVE, LTD.



FILED
2004 APR 21 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: **420 LINCOLN ROAD, STE. 443 MIAMI BEACH FL 33139**
Mailing Address: **P.O. BOX 191768 MIAMI FL 33119-1768**

2. Principal Place of Business: **420 Lincoln Road**
Suite, Apt. #, etc.: **Suite 2D**
3. Mailing Address: **P. O. Box 191679**
Suite, Apt. #, etc.:

City & State: **Miami Beach** City & State: **Miami, FL**

Zip: **33139** Country: **Dade** Zip: **33119-1679** Country: **Dade**

4. FEI Number: **65-0700541** Applied For: Not Applicable

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



MOORE CR2E003 (11/03)

6. Name and Address of Current Registered Agent
**PLC INVESTMENTS, INC.
420 LINCOLN ROAD, STE. 443
MIAMI BEACH FL 33139**

7. Name and Address of New Registered Agent
Name:
Street Address (P.O. Box Number is Not Acceptable): **420 Lincoln Road**
Suite 2D
City: **Miami Beach** State: **FL** Zip Code: **33139**

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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record: **\$2,338,054.00**

10. Amount of Capital Contributions in FLORIDA to date:

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**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	
DOCUMENT #	P96000087080
NAME	PLC COVE, INC.
STREET ADDRESS	420 LINCOLN ROAD, STE. 443
CITY-ST-ZIP	MIAMI BEACH FL 33139
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	420 Lincoln Road, Suite 2D
CITY-ST-ZIP	Miami Beach, FL33139
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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. **Kendall Cove, Ltd., by; PLC Cove, Inc. Its General Partner, by: Hilda C. Montero, Secretary**

SIGNATURE: *Hilda C. Montero*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date: **4/16/04** Daytime Phone #: **305-531-5220**

STAPLE CHECK HERE