
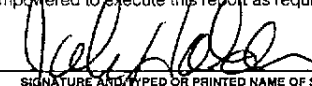


**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**May 05, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # A97000001088			
1. Entry Name VERO PALM ESTATES LTD.			
Principal Place of Business 8320 WEST SUNRISE BLVD., STE. 203 PLANTATION, FL 33322		Mailing Address 8320 WEST SUNRISE BLVD., STE. 203 PLANTATION, FL 33322	
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	
HOLSTEIN, GERALD K C.P.A. 8320 WEST SUNRISE BLVD., STE. 203 PLANTATION, FL 33322		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 _____ DATE _____ <small>Signature typed or printed name of registered agent and title if applicable</small>			
9. Capital Contributions as Shown on record. <b>\$1,350,000.00</b>		10. Amount of Capital Contributions in FLORIDA to date.	
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	HOLDEN, JOHN		
CITY-ST-ZIP	8320 WEST SUNRISE BLVD., STE. 108 PLANTATION, FL 33322	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	HOLDEN, MARY ANN		1100000362164
CITY-ST-ZIP	8320 WEST SUNRISE BLVD., STE 108 PLANTATION, FL 33322	CITY-ST-ZIP	05/05/05-60102-010 526.25
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	HOLDEN, PETER W		
CITY-ST-ZIP	8320 WEST SUNRISE BLVD., STE. 108 PLANTATION, FL 33322	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	HOLDEN, JANET		
CITY-ST-ZIP	8320 WEST SUNRISE BLVD., STE. 108 PLANTATION, FL 33322	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	HOLDEN, DANIEL		
CITY-ST-ZIP	8320 WEST SUNRISE BLVD., STE. 108 PLANTATION, FL 33322	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	HOLDEN, DONNA		
CITY-ST-ZIP	8320 WEST SUNRISE BLVD., STE. 108 PLANTATION, FL 33322	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)(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 620, Florida Statutes			
SIGNATURE: 		JOHN HOLDEN 3-14-05 (954) 370-80	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date Daytime Phone #	



03052005 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0756492 Applied For Not Applicable

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

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