

2004 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By September 8, 2004

DOCUMENT # A97000001674

1. Entity Name  
HARYDA, LTD.



FILED

04 JUL 13 AM 10:40

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MJH

Principal Place of Business  
108 WEST DILIDO DRIVE  
MIAMI BEACH, FL 33139

Mailing Address  
108 WEST DILIDO DRIVE  
MIAMI BEACH, FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07062004

Chg-LP

CR2E003 (10/03)

7/13

4. FEI Number  
65-0782747

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RYWLIN, HAVA  
108 WEST DILIDO DRIVE  
MIAMI BEACH, FL 33139

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

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

DATE

9. Capital Contributions  
as Shown on record.

\$390,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

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 #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
RYWLIN, HAVA  
108 WEST DILIDO DRIVE  
MIAMI BEACH, FL 33139

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P00000117821  
HARYDA, INC.  
108 W. DILIDO DRIVE  
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

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS  
CITY-ST-ZIP  
600039686036  
07/29/04--01028--005 \*\*526.25

STREET ADDRESS  
CITY-ST-ZIP

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 a receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

HAVA RYWLIN

HAVA RYWLIN

7/9/04

305-531-5487

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE