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

STAPLE CHECK HERE

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DOCU 1. Entity Nam	MENT # A990000013	12		SECRETARY OF STATE DIVISION OF CORPORATIONS	
TOMATO INVESTMENTS, LTD.					
Principal Plac	e of Business	Mailing Address		04 MAR 22 PM 2: 37	
1655 27TH ST., STE. 2 1655 27TH ST., STE. 2					
VERO BEACH FL 32960 VERO BEACH FL 32960					
2. Principal Place of Business 3. Mailing Addres 26/4 (3. Mailing Address 26/4 CARdin	Al DRIVE		
Suite, Apt. #, etc. Suite, Apt. #, et		Suite, Apt. #, etc.		MOORE CR2E003 (11/03)	
City & State		City & State Vero Beach, FL		4. FEI Number 65-0940277 Applied For Not Applicable	
Zip	Country	Zip	Country	5 Certificate of Status Desired S8.75 Additional	
	0.01	32463		Fee Required	
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent	
- WILLIAMS ANDREW W				(D.C. Davidson, 1. N. A.	
1655 27TH ST., STE. 2 VERO BEACH FL 32960			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					
9. Capital Contributions \$18,000,000.00 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL DEPT. OF STATE					
as Shown on record. in FLORIDA to date. 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 13. ADDRESS CHANGES ONLY					
DOCUMENT #	P99000063405		STREET ADDRESS		
NAME STREET ADDRESS	CHIEF INVESTMENTS FLORIDA, INC. 1655 27TH ST., STE. 2 VERO BEACH FL 32960		<u> </u>		
CITY-ST-ZIP			CITY-ST-ZIP		
DOCUMENT # NAME	ADDRESS		STREET ADDRESS	4/00/32185214 04/09/04-01014-014 ***526.25	
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		
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			CITY-ST-ZIP		
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DOCUMENT *	<i>t</i> 1.				
STREET ADDRESS			CITY-ST-ZIP		
CITY-ST-ZIP			<u>.I</u>	<u> </u>	
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 employed to execute this report as required by Chapter 620. Florida Statutes.					

2 Andrew W.W.//jams 3/16/04 772-299-7633 SIGNING GENERAL PARTNER Date Dayture Phone #