

# **2004 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A97000002053

**FILED**  
**Jan 05, 2004**  
**Secretary of State**

**Entity Name:** PLAZA ON MAIN LIMITED PARTNERSHIP

**Current Principal Place of Business:**

5454 WISCONSIN AVENUE, SUITE 1265  
CHEVY CHASE, MD 20815

**New Principal Place of Business:**

**Current Mailing Address:**

5454 WISCONSIN AVENUE, SUITE 1265  
CHEVY CHASE, MD 20815

**New Mailing Address:**

**FEI Number:** 52-2056652

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
526 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Capital Contributions as Shown on record:** 7,500.00

**Amount of Capital Contributions in Florida to date:** 7,500.00

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #:

Name: MDR PLAZA LIMITED PARTNERSHIP  
Address: 5454 WISCONSIN AVE., SUITE 1265  
City-St-Zip: CHEVY CHASE, MD 20815

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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:** MICHAEL D RUBIN

MR

01/05/2004

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date