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

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SIGNATURE:

SIGNATUREAND

PRINTED NAME OF SIGNING GENERAL PAR

Apr 22, 2004 08:00 AM Secretary of State DOCUMENT # A9900001907 TENTH VENTURE, LTD. Mailing Address Principal Place of Business 75 NE 6TH AVENUE SUITE 214 75 NE 6TH AVENUE SUITE 214 DELRAY BEACH FL 33483 DELRAY BEACH FL 33483 2. Principal Place of Business 3. Mading Address Suite, Apt. # etc Suite, Apt. #, etc. MOORE CR2E003 (11/03) City & Stat 4. FEI Number City & State Applied For 65-0958954 Not Applicable Ζ_ip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ZENGAGE, JIM Street Address (P.O. Box Number is Not Acceptable) 75 NE 6TH AVENUE SUITE 214 DELRAY BEACH FL 33483 City Zıp 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 9. Capital Contributions 10. Amount of Capital Contributions 1,000,00 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$500,000.00 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. GENERAL PARTNER INFORMATION 12. 13. ADDRESS CHANGES ONLY DOCUMENT # P02000132984 STREET ADDRESS NAME TENTH CONCEPTS, INC. 75 NE 6TH AVENUE SUITE 214 STREET ADDRESS CITY-ST-ZIP U00000137397 04/29/04-30038-007 150.00 CITY-ST-ZIP DELRAY BEACH FL 33483 DOCUMENT # STREET AGGRESS NAME STREET ADDRESS CITY-SI-ZiP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-71P CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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.

FILED