## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

DOCUMENT # A9SU00000294  I temp harms THE PLANAS FAMILY LIMITED PARTNERSHIP  Principile Practice of disuriess  CO JUNE PLANAS  CORL 6ASE, S. F. 33146  CORL 6ASE, S. F. S. F.	<u> </u>	Due by III	ay 1, 2004				êli c	C)		
THE PLANAS FAMILY LIMITED PARTNERSHIP  Principal Place of Business  COR JUAN E, PLANAS  COR LANG COPILAR E, PLANAS  (LOI BAYAMO AND  COPILA GARLS, FL 33146  2. Principal Flace of Business  Suita Agr. 8 doc.  COY A State  COPPO, INC.  CORPOCO, INC.  CORPO	· · · · · · · · · · · · · · · · · · ·						FIL <b>EO</b>			
CO. DR. CO. STATE CONTROL OF CONT						04 MAY -5 PM 1:54				
CORNECTIONS  State Apt # etc.  State Apt # etc.  Cory & State  Ciry & St	Principal Place of Business Mailing Address					SECRETARY OF STATE				
CORL GABLES, FL 33146  2. Principal Place of Blushness  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Country  Zp  Country  Zp  Country  Zp  Country  Zp  Country  Zp  Country  A, Mame and Address of Current Registered Agent  Name  T, Mame and Address of Current Registered Agent  Name  T, Mame and Address of Current Registered Agent  Name  T, Mame and Address of New Registered Agent  Name  T, Ma	C/O JUAN E. PLANAS C/O JUAN E. PLANA					TAL	LAHASSEE	, FLORIDA	<b>\</b>	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite   City & State   City & City & State   City & City & State   City & State   City & City	CORAL GABLES, FL 33146 CORAL GABLES, FL 3314									
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6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  8. Not Acceptable  7. Name and Address of New Registered Agent  8. Not Acceptable  7. Name and Address of New Registered Agent  8. Not Acceptable  7. Name and Address of New Registered Agent  8. Not Acceptable  7. Name and Address of New Registered Agent  8. Not Acceptable  9. Copy Acceptable  8. Not Acceptable  9. Copy Acceptable	City & State City & State				· ·		290		Applied For Not Applicable	
CORPCO, INC. 2898 SOUTH BAYSHORE DR., 7TH FLOOR MIAMI, FL 33133.    Note: Address (F.O. Box Number is Not Acceptable)	Zip	Country	Zip	Country	y 	5. Certificate of	Status Desired			
CORPCO, INC. 2899 SOUTH BAYSHORE DR., 7TH FLOOR MIAMI, FL 33133    Included address (PO, Box Number is Not Acceptable)	6. Nam	Nama								
2699 SOUTH BAYSHORE DR., 7TH FLOOR MIAMI, FL 33133    City Con Art Cability   FL   City Con Art Cabilit	1					VAN E. PLANAS				
8. The above named entity submits that date and for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered order agent and that Subscience of the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered order agent and that Subscience is a Strong on record.  9. Capital Contributions as Strong on record.  \$4.00	2699 SOUTH BAYSHORE DR., 7TH FLOOR									
8. The above named entity submit statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and according to the obligations of registered segment agent as the resource of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and according to the obligations of record.  Signature Segment plants of the segment of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and according to the segment of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and according to the segment of the sement of the segment of the sement					1010 BAYAMO AVE					
SIGNATURE  Signature, possible professional registering of required upon and the floorease.  9. Capital Contributions as Shown on record.  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 filled to change a general partner.  12. GENERIAL PARTNER NPORMATION 13. ADDRESS CHANGES ONLY  DOCUMENT / NAME 1010 BAYAMO AVE.  CITY-ST-2P  CORAL: GABLES, FL 33146  CITY-ST-2P  DOCUMENT / NAME STRET ADRESS  CITY-ST-2P  DITY-ST-2P  DITY-ST-2P  DITY-ST-2P  DITY-ST-2P  DITY-ST-2P  THE ADRESS  CITY-ST-2P  DITY-ST-2P  DITY-S	1 COR!						LES		<u> 33178</u>	
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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 / NAME  SIRET ADDRESS  1010 BAYAMO AVE.  CITY-ST-ZP  DOCUMENT / NAME  SIRET ADDRESS  CITY-ST-ZP  TOCUMENT / NAME  SIRET ADDRESS  CITY-ST-ZP  TOCU	SIGNATURE Signature, typed of righted registered agent and title if applicable.									
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner.  12.		\$495,000.00	10. Amount of Capita in FLORIDA to de	tal Contribu	1jons 269,3	390				
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SIGNATURE: TUAN E. PLANAS 4/28/04 305-667-44	14. I hereby certify that t indicated on this rep the receiver or truste	he information supplied with ort is true and accurate and e empowered to execute the	this filling does not qualify for that my signature shall have a report as required by Chap	or the exeme the same oter 620, Fl	ption stated in Se legal effect as if rr orida Statutes	ction 119.07(3)(i), nade under oath; th	Florida Statutes, nat I am a Genera	al Partner of the	e limited partnership or	
SIGNATURE FID TYPES ON PRINTED NAME OF SIGNING GENERAL PARTITIER Date Daytime Phone #	SIGNATURE:	SIGNATURE AND TYPICATE				IAS !	J			