


2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
*** DUE BY MAY 1, 2005**

FILED
Jan 25, 2005 08:00 AM
Secretary of State

DOCUMENT # A99000000530					
1. Entity Name GPR INVESTMENTS, LTD.					
Principal Place of Business 12940 NW 107 COURT MIAMI FL 33178			Mailing Address 12940 NW 107 COURT MIAMI FL 33178		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 32-0003010	
6. Name and Address of Current Registered Agent ATRIUM REGISTERED AGENTS, INC. 1500 SAN REMO AVE., SUITE 125 CORAL GABLES FL 33146				7. Name and Address of New Registered Agent 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$500,000.00			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				13. ADDRESS CHANGES ONLY	
DOCUMENT #	P990000025580			STREET ADDRESS	
NAME	RIOS REALTY, INC.			CITY- ST- ZIP	
STREET ADDRESS	12950 NW 107 CT.				
CITY- ST- ZIP	MIAMI FL 33178				
DOCUMENT #				STREET ADDRESS	
NAME				CITY- ST- ZIP	
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CITY- ST- ZIP					



1ST MOORE CR2E003 (10/04)

4. FEI Number **32-0003010** Applied For Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

11. FILE NOW!!! Due by May 1, 2005.
See Block 11 instructions for fee info.

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01/26/05-80077-013 526.25

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE