


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

**FILED**  
**Mar 26, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # A00000000146**

1. Entity Name  
**SOUTHSTAR STORAGE LIMITED PARTNERSHIP**



Principal Place of Business      Mailing Address

**751 PARK OF COMMERCE DRIVE  
SUITE 128  
BOCA RATON, FL 33487**

**751 PARK OF COMMERCE DRIVE  
SUITE 128  
BOCA RATON, FL 33487**

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



01062004    Chg-LP      CR2E003 (10/03)

4. FEI Number  
**65-0852278**      Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**COLMAN, NANCY B ESQ.  
150 EAST PALMETTO PARK ROAD  
SUITE 750  
BOCA RATON, FL 33432**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$100.00**      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

DOCUMENT #	P00000005991
NAME	JADA INVESTMENTS, INC.
STREET ADDRESS	751 PARK OF COMMERCE DRIVE
CITY - ST - ZIP	BOCA RATON, FL 33487
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
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CITY - ST - ZIP	
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CITY - ST - ZIP	

U00000104242  
04/06/04-20001-003 150.00

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 prepare this report as required by Chapter 620, Florida Statutes

SIGNATURE:       3/15/04      561-982-7776

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER      Date      Daytime Phone #