2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 7, 2005

	·*		SEOURE FI	LEf:					
	Due By September 7, 2005  DOCUMENT # A0000000232  1. Entity Name ZENITH ST LTD.					DI\ <b>O</b>	SECRETAR VISION OF S	Y OF STA	ATE TIONS
	Principal Place of Business 1500 W CYPRESS CREEK FY LAUDERDALE, FL 333		Mailing Address 1500 W CYPRESS CREEK RD, STE 409 FT LAUDERDALE, FL 33309		0X				
}	2. Principal Place of Business		3. Mailing Address						
}	Suite, Apt. #, etc.		Suite, Apt. #, etc.		_07262005	Chg-LP	CR2E00	3 (10/03)	
	City & State		City & State		<del> ,</del>	4. FEI Number 65-0977	892		Applied For Not Applicable
ļ	Zip Country		Zip Country		ntry		f Status Desired		8.75 Additional
ŀ	_6. Name and Address of Current Regist		Registered Agent	stered Agent		7. Name and A	ddress of New R		
ĺ					Name				
	BRENNER, SCOTT I		IC.		Street Address (P.O. Box Number is Not Acceptable)				
`	1500 W CYPRESS C FT LAUDERDALE, F	,							
,					City	FL Zip Code			
	The above named entity submits this statement for the purpose of changing its register     the obligations of registered agent.				ed office or register	ed agent, or both	, in the State of Flo	orida. I am ta	miliar with, and accept
ا	SIBNATURE ————————————————————————————————————								
	Signature, typed or printed name of registered agent and title if applicable.  DATE								
	9. Capital Contributions as Shown on record. \$500,000.00 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.	*	it made be mee	ADDRESS CH		
STAPLE CHECK HERE	DOCUMENT / L03000013	STREET ADDRESS							
	I	CYPRESS CREEK ROA ERDALE, FL 33309	D, STE. 409		r-ST-ZIP	501 10/04/4	00602 )501068	221 005	95 **926.25
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	DOC DIMENT # NAME * CIRCLE MODOCCC			STR	EET ADDRESS				
	STREET MODRESS CITY-ST-ZIP				r-ST-ZIP				Laboration Col.
	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								
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNERS Date Date Doylong Phone 8									