

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR 31 AM 8:30

DOCUMENT # A00000000418

1. Entity Name
CONCEPCION LIMITED PARTNERSHIP



Principal Place of Business
C/O SHUTTS & BOWEN, LLP
201 SOUTH BISCAYNE BLVD., SUITE 1500 LN
MIAMI, FL 33131

Mailing Address
C/O SHUTTS & BOWEN, LLP
201 SOUTH BISCAYNE BLVD., SUITE 1500 LN
MIAMI, FL 33131

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03102005

Chg-LP

CR2E003 (10/03)

4. FEI Number

65-1008659

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NOSTRO, LOUIS
728 CATALONIA AVENUE
CORAL GABLES, FL 33134

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

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

DATE

9. Capital Contributions
as Shown on record.

\$4,500,000.00

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
DOCUMENT # P00000022484
NAME CONCEPCION FAMILY CORPORATION
STREET ADDRESS 201 SOUTH BISCAYNE BLVD., SUITE 1500
CITY-ST-ZIP MIAMI, FL 33131

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/24/05

Date

305-205-2342

Daytime Phone

STAPLE CHECK HERE

**SHUTTS
&
BOWEN
LLP**

ATTORNEYS AND COUNSELLORS AT LAW

LOUIS NOSTRO
DIRECT LINE (305) 379-9164
FLORIDA BAR BOARD CERTIFIED
IN THE AREAS OF TAXATION
WILLS, TRUSTS & ESTATES

EMAIL ADDRESS:
LNOSTRO@SHUTTS-LAW.COM

March 29, 2005

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314-6327

**Re: Concepcion Limited Partnership
2005 Limited Partnership Uniform Business Report (UBR)
Document Number: A00000000418**

Dear Division:

I enclose for filing the 2005 Uniform Business Report (UBR) for the Concepcion Limited Partnership, along with a check in the amount of \$535.00 (to cover \$526.25 for the filing fee and \$8.75 for a certificate of status). A return envelope is enclosed for your convenience.

Please contact me if you have any questions. Thank you for your assistance.

Sincerely,


Louis Nostro

Enclosures

cc: Mr. Jose Concepcion

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