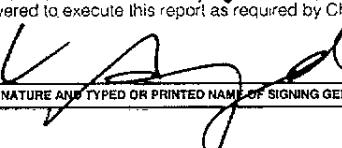


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
May 16, 2005 08:00 AM
Secretary of State

DOCUMENT # A00000001056							
1. Entity Name GAK PARTNERS, LTD.							
Principal Place of Business 2300 GLADES ROAD, SUITE 100E BOCA RATON, FL 33431		Mailing Address 2300 GLADES ROAD, SUITE 100E BOCA RATON, FL 33431					
2. Principal Place of Business		3. Mailing Address					
Suite, Apt #, etc.		Suite, Apt #, etc.					
City & State		City & State					
Zip	Country	Zip	Country				
6. Name and Address of Current Registered Agent GAK EQUITY, INC. 2300 GLADES ROAD, SUITE 100E BOCA RATON, FL 33431				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 <small>Signature, typed or printed name of registered agent and title if applicable</small>				<small>DATE</small>			
9. Capital Contributions as Shown on record. \$7,500.00		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 #	P00000063965 GAK EQUITY, INC. 2300 GLADES ROAD, SUITE 100E BOCA RATON, FL 33431			STREET ADDRESS			
NAME				CITY - ST - ZIP			
STREET ADDRESS							
CITY - ST - ZIP							
DOCUMENT #				STREET ADDRESS	U0000036665 05/16/05-80001-017 141.25		
NAME				CITY - ST - ZIP			
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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: 		William R. Greenfield		2/28/05	561-392-6662		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>				<small>Date</small>	<small>Daytime Phone #</small>		

STAPLE CHECK HERE