LIMITED PARTNERSHIP

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DOCL	JMENT # A0000000	1105	1. 21	F	FILED	
1. Entity Name						
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SYMPHONY TOWERS, LLLP					CTADY OF STATE	
				SECR	ETARY OF STATE HASSEE FLORIDA	
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	Place of Business	3. Mailing Address		····	DO NOT WRITE IN THIS:	SPACE
	orporate Blvd., NW	2201 Corporate	Blvd., NW		· · · · · · · · · · · · · · · · · · ·	
Suite, Ap	I. #, eIC.	Suite, Apt. #, etc.			DUE BY MAY 1	
City & Sta	ate	City & State		4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Applied For
		Boca Raton, FL		65-10	26645	Not Applicable
Zip 33431	Country	Zip	Country	5. Certificate o		\$8.75 Additional
33431	USA	33431	USA	7. Name and Ad	dress of Current Registered	Fee Required
:			Name			
	DO_NOT_W	RITE	Jeii Street Ado	rey A. Deutc	1, P.A.	
IN THIS SPACE			7777	Street Address (P.O. Box Number is Not Acceptable) 7777 Glades Road Suite 300		
			Suit			
	•		City	Raton	FL	Zip Code 33434
8. The above	e named entity submits this statement for	the purpose of changing its r	enistered office or re	enistered agent or both		33434
	o name only cashing the statement of	the perpose of chariging his f	agistered office of the	ogistered agent, or both,	in the State of Folida.	}
SIGNATURE	Ci	CO W P M				
Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions 10. Amount of Capital Cont						
9. Capital Co	ontributions		Contributions		DATE	TO REDT OF STATE
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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

By: Altman Development Corporation, General Partner

SIGNATURE:

2/26/02

(561) 997-8661