## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 8, 2004

## FILED **DOCUMENT # A0000001562** HOUSTON WIRELESS PARTNERS, LTD., LLLP 04 AUG -2 PH 2:59 SECHETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 11000 PROSPERITY FARMS RD., STE. 204 11000 PROSPERITY FARMS RD., STE, 204 PALM BEACH GARDENS, FL 33410 PALM BEACH GARDENS, FL 33410 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07252004 CR2E003 (10/03) Chg-LP 4. FEI Number Applied For City & State City & State 65-1071066 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES, FL 33134 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered affice 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 In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice. 9. Capital Contributions 10. Amount of Capital Contributions \$1,000.00 as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. DOCUMENT # STREET ADDRESS NAME DOMM, GEORGE W STREET ADDRESS 946 RODNEY DR. CITY-ST-ZIP SAN LÉANDRO, CA 94577 CITY-ST-ZIP 000039948290 DOCUMENT # STREET ADDRESS 08/06/04--01035--007 \*\*141.25 CHEN, SHIRLEY NAME STREET ADDRESS 3412 HACKNEY CT. CITY-ST-ZIP CITY-ST-ZIP RALEIGH, NC 27613 DOCUMENT # STREET ADDRESS ERVIN, JERRY STREET ADDRESS 9733 S. DELAWARE CT. CITY-ST-ZIP . . . . . . . CITY-ST-ZIP **TULSA, OK 74137** DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-77P DOCUMENT # STREET ADDRESS SHOK STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT A STREET ADDRESS NAME STREET ADDRESS 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 510-638-0656 SIGNATURE: