


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2005**

**FILED
Mar 18, 2005 08:00 AM
Secretary of State**

DOCUMENT # A00000001562 1. Entity Name HOUSTON WIRELESS PARTNERS, LTD., LLLP	
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Principal Place of Business 11000 PROSPERITY FARMS RD., STE. 204 PALM BEACH GARDENS FL 33410	Mailing Address 11000 PROSPERITY FARMS RD., STE. 204 PALM BEACH GARDENS FL 33410
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1ST MOORE CR2E003 (10/04)

2. Principal Place of Business Suite, Apt. #, etc City & State Zip Country	3. Mailing Address Suite, Apt #, etc City & State Zip Country
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4. FET Number 65-1071066	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

11. FILE NOW!!! Due by May 1, 2005.
See Block 11 instructions for fee info.

9. Capital Contributions as Shown on record. \$1,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 # NAME STREET ADDRESS CITY - ST - ZIP	DOMM, GEORGE W 846 RODNEY DR. SAN LEANDRO CA 94577
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	CHEN, SHIRLEY 3412 HACKNEY CT. RALEIGH NC 27613
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	ERVIN, JERRY 9793 S. DELAWARE CT. TULSA OK 74137
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS CITY - ST - ZIP	
STREET ADDRESS CITY - ST - ZIP	03/18/05-80015-005 150.00
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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, the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: <u>George W. Domm</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	George W. Domm	Feb. 15, 2005	Date	Daytime Phone #
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