


**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004**

FILED
Mar 04, 2004 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # A00000001807 |  |
| 1. Entity Name THE TENENBAUM LIMITED PARTNERSHIP | |

| | |
|--|--|
| Principal Place of Business 2540 N.E. 48TH COURT LIGHTHOUSE POINT FL 33064 | Mailing Address 2540 N.E. 48TH COURT LIGHTHOUSE POINT FL 33064 |
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|---|-----------------------------------|
| 2. Principal Place of Business SAME | 3. Mailing Address SAME |
|---|-----------------------------------|

| | |
|---------------------|---------------------|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
|---------------------|---------------------|

| | |
|--------------|--------------|
| City & State | City & State |
|--------------|--------------|

| | | | |
|-----|---------|-----|---------|
| Zip | Country | Zip | Country |
|-----|---------|-----|---------|



MOORE CR2E003 (11/03)

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|------------------------------------|--|
| 4. FEI Number 65-1072412 | Applied For <input type="checkbox"/> Not Applicable |
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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|---------------------------------------|

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| 6. Name and Address of Current Registered Agent FROST, IRWIN M 1111 BRICKELL AVENUE, SUITE 2050 MIAMI FL 33131 | 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 |
|-----------|------|

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| 9. Capital Contributions as Shown on record. \$100.00 | 10. Amount of Capital Contributions in FLORIDA to date. | 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION |
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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 | | 13. ADDRESS CHANGES ONLY | |
|---|--|--------------------------|--|
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | P00000110195 MAXWELL S, INC. 2540 N.E. 48TH COURT LIGHTHOUSE POINT FL 33064 | STREET ADDRESS | |
| | | CITY - ST - ZIP | U000000087586 03/15/04-00014-022 141.25 |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS | |
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| | | CITY - ST - ZIP | |

STAPLE CHECK HERE

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: <i>Maxwell S. Inc.</i> | DATE | Daytime Phone # |
|-----------------------------------|------|-----------------|