2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

SIGNATURE:

Apr 14, 2004 08:00 AM Secretary of State **DOCUMENT # A00000001849** MARENKA PARTNERS, LTD. Principal Place of Business Mailing Address 13004 SAN JOSE STREET C/O CHRISTOPHER W. BOYETT, ESQ. 701 BRICKELL AVENUE, SUITE 3000 CORAL GABLES, FL 33157 MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 02232004 Chg-LP CR2E003 (10/03) 4. FEI Number Applied For City & State City & State 65-1108195 Not Applicable 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 INTRASTATE REGISTERED AGENT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVENUE, SUITE 3000 MIAMI, FL 33131 City Zip Code 3. 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 Signaluro, typed or ordinand name of registered agent and title if applicable 10. Amount of Capital Contributions 9. Capital Contributions \$3,960,000.00 in ELORIDA to date as Shown on record. 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. ADDRESS CHANGES ONLY 12. GENERAL PARTNER INFORMATION 13. DOCUMENT / SIREET ADDRESS MCCARTHY, SANDRA D TRUSTEE NAME STREET ADDRESS 701 BRICKELL AVE., SUITE 3000 CITY-ST-78 JJ00000120787 CITY-ST- 38 MIAMI, FL 33131 04/20/04-80024-004-526.25 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CIEY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CHIY-ST-ZIP Caty-SI-202 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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)(7), 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 calls, 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

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