


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

**FILED**  
**May 06, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A00000001857</b>					
1. Entity Name <b>Y.A.A.R.V.M. FAMILY LIMITED PARTNERSHIP</b>					
Principal Place of Business <b>3250 SOUTH DIXIE HWY MIAMI FL 33133</b>			Mailing Address <b>3250 SOUTH DIXIE HWY MIAMI FL 33133</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>58-2594379</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>MIAMI-DADE HOLDINGS CORPORATION 3250 SOUTH DIXIE HWY MIAMI FL 33133</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>				DATE _____	
9. Capital Contributions as Shown on record. <b>\$65.00</b>		10. Amount of Capital Contributions in FLORIDA to date. <b>\$50,00</b>		11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.	
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	MARGOLIN, MARINA		CITY-ST-ZIP		
STREET ADDRESS	3250 SOUTH DIXIE HWY				
CITY-ST-ZIP	MIAMI FL 33133				
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1ST MOORE CR2E003 (10/04)

4. FEI Number **58-2594379**

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

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

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
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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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

STAPLE CHECK HERE

*04.21.05*