

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

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

**DOCUMENT # A00000001942**

1. Entity Name  
**MURANO THREE, LTD.**



Principal Place of Business  
**2828 CORAL WAY, PENTHOUSE SUITE**  
**MIAMI, FL 33145**

Mailing Address  
**2828 CORAL WAY, PENTHOUSE SUITE**  
**MIAMI, FL 33145**

*\$150.00*



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02112004

Chg-LP

CR2E003 (10/03)

4. FEI Number  
**65-1062186**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HERNANDEZ, ANGELA**  
**2828 CORAL WAY, PENTHOUSE SUITE**  
**MIAMI, FL 33145**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
 as Shown on record. **\$1,000.00**

10. Amount of Capital Contributions  
 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.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **P00000114772**  
 NAME **MURANO THREE, INC.**  
 STREET ADDRESS **2828 CORAL WAY, PENTHOUSE SUITE**  
 CITY-ST-ZIP **MIAMI, FL 33145**

STREET ADDRESS

CITY-ST-ZIP

**U000000088300**

**03/15/04-80045-020 150.00**

DOCUMENT #  
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 CITY-ST-ZIP

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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)(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:

*Angel Hernandez*

**ANGEL HERNANDEZ**  
**VICE-PRESIDENT**

**2-12-04** **305**  
**4609900**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE