2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

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

DOCUMEN 1. Entity Name JENNIFER EQU	T # A0100000 ITIES I, LTD.	00122		Secretary of Sta	
12000 BISCAYNE BLVD., SUITE 803		Mailing Address 12000 BISCAYNE MIAMI, FL 33181	BLVD., SUITE 803		
2. Principal Place of Bu	ısiness	3. Mailing Address			
- Suite, Apt #, etc.		Suite, Apt #, elc.		04162004 Chg-LP CR2E003 (10/03)	
City & State		City & State		4. FEI Number Applied For	
Zip	Country	Ζιρ	Country	5. Certificate of Status Desired S8.75 Additional	
6. Na	l me and Address of Curre	nt Registered Agent		7. Name and Address of New Registered Agent	
			Name		
JENNIFER EQUIT 12000 BISCAYNE MIAMI, FL 33181	BLVD., SUITE 803		Street Addr	ess (P.O. Box Number is Not Acceptable)	
in in, i a solo!			City	E	
9 The above gamed a	ntitu euhmite thie statement	for the number of change		FL Zip Code put the State of Florida. I am familiar with, and acceptions and acceptions of the state of Florida.	
the obligations of reg		nor the purpose of crisinging	ig its registered onlice of Teg	istered agent, or door, in the diate of Folicia. Fair raining with allo access	
SIGNATURE	ped or prihled hame of registered ag	ent and title if applicable.		DATE	
Capital Contributions as Shown on record		10. Amount of 0 in FLORIDA	Capital Contributions to date.		
NOT	A GENERAL PARTNER	R THAT IS A BUSINESS	S ENTITY MUST BE REC	GISTERED AND ACTIVE WITH THIS OFFICE. ment must be filed to change a general partner.	
2,		IER INFORMATION	13.	ADDRESS CHANGES ONLY	
-	P00000089032 JENNIFER EQUITIES I, INC.				
	1		CiTY ST ZIP	 	
·	FL 33181				
DOCUMENT# VAME			STREET ADDRESS		
STREET ADDRESS			CLTY-ST-ZIP	000000158801 05/10/04-30004-013 141.25	
DOCUMENT #				05/10/04-30004-015 141.25	
NAME			STREET ADDRESS		
TREET ADDRESS			CITY⊹ST-ZIP		
DOGUMENT #			STREET ADDRESS		
JAME Street Adoress			I –		
CITY ST ZIP			CITY-ST ZIP		
DOCUMENT #			STREET ADDRESS		
STREET ADDRESS			CETY - ST - ZIP		
DITY ST-ZIP					
IAME			STREET ADDRESS		
STREET ADDRESS City St. Zip			CITY-ST ZIP		
14. I hereby certify that	nort fo true and accurate a	and that my cionature chall:	have the same legal effect a	in Section 119.07(3)(i), Florida Statutes. I further certify that the information is if made under oath, that f am a General Partner of the limited partnerships	
SIGNATURE	Dan	OR DON'TED NAME OF SIGNING O	5 Harri	for Equities I Inc. 4/29/04 680	