


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Mar 10, 2004 08:00 AM
Secretary of State

DOCUMENT # A0100000131			
1. Entity Name FAY INVESTMENTS, LTD.			
Principal Place of Business 2101 CORPORATE BLVD. SUITE 107 BOCA RATON, FL 33431		Mailing Address 2101 CORPORATE BLVD. SUITE 107 BOCA RATON, FL 33431	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite Apt # etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
M & W AGENTS, INC. 2101 CORPORATE BLVD. SUITE 107 BOCA RATON, FL 33431		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>			
9. Capital Contributions as Shown on record \$1,800,000.00		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 #	L01000001261	STREET ADDRESS	
NAME	FAY HOLDINGS, L.L.C.	CITY-ST-ZIP	03/10/04-80010-002 526.25
STREET ADDRESS	2101 CORPORATE BLVD.		
CITY-ST-ZIP	BOCA RATON, FL 33431		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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 appointed to execute this report as required by Chapter 620, Florida Statutes			
SIGNATURE _____		_____ Manager of Fay Holdings LLC, G.P. 2/23/04 561 998-7847	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		DATE	



02112004 Chg-LP CR2E003 (10/03)

4. FEI Number **65-1071190** Applied For Not Applicable

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

STAPLE CHECK HERE