


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

**FILED**  
**Apr-09, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # A0100000384**

1. Entity Name  
**MILPORT INVESTORS LTD.**



Principal Place of Business  
**3711 S.W. 27TH STREET**  
**MIAMI, FL 33134**

Mailing Address  
**3711 S.W. 27TH STREET**  
**MIAMI, FL 33134**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country



03312004 Chg-LP CR2E003 (10/03)

4. FCI Number  
**65-1090129**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**WEISSLER, ROBERT I**  
**2200 MUSEUM TOWER**  
**150 WEST FLAGLER STREET**  
**MIAMI, FL 33130**

7. Name and Address of New Registered Agent

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

9. Capital Contributions as Shown on record. **\$863,002.37**

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 # NAME STREET ADDRESS CITY ST ZIP	<b>L01000004078</b> <b>NILY, LLC</b> <b>3711 S.W. 27TH STREET</b> <b>MIAMI, FL 33134</b>	STREET ADDRESS	
DOCUMENT # NAME STREET ADDRESS CITY ST ZIP	<b>L01000004068</b> <b>PORTER HOUSE, LLC</b> <b>3711 S.W. 27TH STREET</b> <b>MIAMI, FL 33134</b>	STREET ADDRESS	
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 04/16/04 88681-822 526.25

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *John Milport* *4/9/2004*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #