


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 22, 2005 8:00 am
Secretary of State

DOCUMENT # A01000000388					
1. Entity Name 6759 LIMITED					
Principal Place of Business 2010 N.E. 7TH AVENUE, SUITE #2 DANIA, FL 33004			Mailing Address 2010 N.E. 7TH AVENUE, SUITE #2 DANIA, FL 33004		
2. Principal Place of Business P.O. Box 24903 Suite, Apt. #, etc.			3. Mailing Address Same Suite, Apt. #, etc.		
City & State Ft. Lauderdale, FL			City & State Same		
Zip 33307		Country USA		4. FEI Number 59-3703275	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent VITOLO, CHRISTINE 2010 N.E. 7TH AVENUE, SUITE #2 DANIA, FL 33004				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1239 N.E. 8th Avenue City Ft. Lauderdale FL Zip Code 33304	
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: <i>[Signature]</i> DATE: 4-19-05					
9. Capital Contributions as Shown on record. \$350,000.00			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 # P01000019351 NAME 6759, INC. STREET ADDRESS 2010 N.E. 7TH AVENUE, SUITE #2 CITY-ST-ZIP DANIA, FL 33004			STREET ADDRESS 1239 N.E. 8th Avenue CITY-ST-ZIP Ft. Lauderdale, FL 33304		
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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: <i>[Signature]</i> G.P.			Date: 4-19-05 Daytime Phone #: 954 763-5488		

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