## 2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2004

SIGNATURE: By:

## Apr 07, 2004 08:00 AM Secretary of State DOCUMENT # A01000001003 1. Entity Name DILSON INVESTMENTS LIMITED PARTNERSHIP Mailing Address Principal Place of Business C/O ENGELBERG, CANTOR, & MILGRIM, P.L 3230 STIRLING ROAD, SUITE 1 C/O ENGELBERG, CANTOR, & MILGRIM, P.L 3230 STIRLING ROAD, SUITE 1 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #, etc. CR2E003 (11/03) Applied For City & State City & State 4. FEI Number 65-1123958 Not Applicable Zφ \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ENGELBERG, MORRIS ESQ. C/O ENGELBERG, CANTOR, & MILGRIM, P.L. Street Address (P.O. Box Number is Not Acceptable) 3230 STIRLING ROAD, SUITÉ 1 HOLLYWOOD FL 33021 City 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 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$1,000,000.00 as Shown on record. in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION 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 ADDRESS CHANGES ONLY P01000072479 DOCUMENT € STREET ADDRESS MARKE DILSON ENTERPRISES, INC. STREET ADDRESS 3230 STRILING ROAD, SUITE 1 CITY - ST - ZIP U00000111609 CITY-ST-ZIP HOLLYWOOD FL 33021 <del>04/13/04-88826-889-526.25</del> DOCUMENT # STREET ADDRESS NAME STREET ADDRESS C07Y-ST-78P CITY-ST-ZIP BOCHMENT A STREET ADDRESS NAME STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS C(TY-ST-2)2 CITY+ST-ZIP BOCUMENT # STREET ADDRESS 868.6E STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CHTY-ST-ZIP CITY-ST-ZIP 14. If hereby certify that the information supplied with this filling 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 DITSON PARTNERS, INC., GENERAL PARTNER

Jeffrey Dilson, President

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