


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

**FILED**  
**Apr 19, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A01000001530</b> 1. Entity Name <b>PADIN FAMILY LIMITED PARTNERSHIP</b>					
Principal Place of Business <b>100 SE SECOND ST          SUITE 2100          MIAMI, FL 33131</b>			Mailing Address <b>100 SE SECOND ST          SUITE 2100          MIAMI, FL 33131</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>65-1092752</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>PADIN, MERCEDES          100 SE SECOND ST          SUITE 2100          MIAMI, FL 33131</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. <b>\$500.00</b>			10. Amount of Capital Contributions in FLORIDA to date. <b>\$ 500.00</b>		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT #	P01000108491		STREET ADDRESS		
NAME	PADIN FAMILY INVESTMENTS, INC.		CITY-ST-ZIP		
STREET ADDRESS	100 SE SECOND ST SUITE 2100		CITY-ST-ZIP	U000000133304	
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP	04/27/04-80081-010 141.25	
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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)(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.					
<b>SIGNATURE:</b> <i>PADIN Family Investments, INC. General Partner</i> <i>By Mercedes Padin, its President 4/14/04 305347-4094</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER <span style="float: right;">Date Daytime Phone #</span>					
<b>MERCEDES PADIN</b>					

STAPLE CHECK HERE