

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

FILED
2004 APR 30 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A02000000071



1. Entity Name
ADRIANBUILDERS AT TAMiami AIRPORT II, LTD.

Principal Place of Business
2460 SW 137TH AVE., SUITE 238
MIAMI, FL 33175

Mailing Address
% A&P REGISTERED AGENT, INC.
2450 SW 137TH AVE., SUITE 226
MIAMI, FL 33175

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
A&P Registered Agent, Inc.
Suite, Apt. #, etc.
2450 SW 137 Ave., Ste. 226
City & State
Miami, Florida
Zip Country
33175 USA



04012004 Chg-LP CR2E003 (10/03)

4. FEI Number
01-0660786

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
~~A&P REGISTERED AGENT, INC.
2450 SW 137TH AVE., SUITE 226
MIAMI, FL 33175~~

7. Name and Address of New Registered Agent
Name *A&P Registered Agent, Inc.*
Street Address (P.O. Box Number is Not Acceptable)
2450 SW 137 Avenue
Suite 226
City *Miami* FL Zip Code *33175*

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 obligation of registered agent.

SIGNATURE *Gretel Rodriguez, President* DATE *4/1/04*

9. Capital Contributions as Shown on record. \$9,000.00

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	
DOCUMENT #	P02000006008
NAME	ADRIANBUILDERS OFFICE PARK I, INC.
STREET ADDRESS	2460 SW 137TH AVE., SUITE 238
CITY-ST-ZIP	MIAMI, FL 33175
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<i>300036194073</i>
CITY-ST-ZIP	<i>05/12/04--01035--013 **151.75</i>
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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)(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: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #