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

Mar 29, 2004 08:00 AM Secretary of State DOCUMENT # A02000000909 1. Entity Name THE VANCE REAL ESTATE LIMITED PARTNERSHIP Mailing Address Principal Place of Business C/O STEPHEN AND ROBIN VANCE 4049 S.W. 7TH ST. PLANTATION FL 33317 4049 S.W. 7TH ST. PLANTATION FL 33317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E003 (11/03) Applied For City & State 4. FEI Number City & State 02-0637441 Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WACHS, JEFFREY S ESQ. Street Address (P.O. Box Number is Not Acceptable) 1177 S.E. 3RD AVE. FORT LAUDERDALE FL 33316 Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 9. Capital Contributions \$5,000.00 SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. as Shown on record. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 13. 12. DOCUMENT # STREET ADDRESS NAME VANCE, STEPHEN A 4049 S.W. 7TH ST. STREET ADDRESS CITY-ST-7/P CITY-SI-ZIP PLANTATION FL 33317 DOCUMENT # STREET ADDRESS NAME VANCE, ROBIN J STREET ADDRESS 4049 S.W. 7TH ST. CITY-ST-ZIP CITY -ST - ZIP PLANTATION FL 33317 DOCUMENT # STREET ADDRESS MAME STREET ADDRESS CITY-ST-7IP CHY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-782 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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

SIGNATURE:

STAPLE CHECK HERE

Robin J. VANG 3-25-04

FILED