

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # A02000000978

1. Entity Name
LEDER ENTERPRISES #2, LTD.



Principal Place of Business C/O LEDER GROUP INVESTMENT PROPERTIES 6530 WEST ROGERS CIRCLE, STE. #31 BOCA RATON, FL 33487	Mailing Address C/O LEDER GROUP INVESTMENT PROPERTIES 6530 WEST ROGERS CIRCLE, STE. #31 BOCA RATON, FL 33487
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02102004 Chg-LP CR2E003 (10/03)

2. Principal Place of Business		3. Mailing Address		4. FEI Number 75-3101431		Applied For Not Applicable	
Suite, Apt #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
DANIELS, NICHOLAS M ESQ. THERREL BAISDEN, P.A. SUNTRUST INT'L CTR, 1 SE 3RD AVE. STE 2400 MIAMI, FL 33131		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record \$4,572,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 # NAME STREET ADDRESS CITY - ST - ZIP	P02000078473 LEDER GROUP #2, INC. 6530 WEST ROGERS CIR., STE. 31 BOCA RATON, FL 33487	STREET ADDRESS	
		CITY - ST - ZIP	000000139997 04/29/04-90142-023 526.25
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS	
		CITY - ST - ZIP	
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		CITY - ST - ZIP	

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: _____ **4/19/04** **561-995-7878**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE