2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005 FILED Apr 30, 2005 08:00 AM DOCUMENT # A0200001030 **Secretary of State** 1. Entity Name MARBELLA ESTATES, LTD. Principal Place of Business Mailing Address % BOULDER VENTURE % BOULDER VENTURE 2226 S.R. 580 2226 S.R. 580 CLEARWATER, FL 33763 CLEARWATER, FL 33763 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc 03232005 Chg-LP CR2E003 (10/03) City & State City & State 4. FEl Number Applied For 51-0419706 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HUDOBA, STEPHEN M Street Address (P.O. Box Number is Not Acceptable) 101 EAST KENNEDY BOULEVARD, SUITE 3700 TAMPA, FL 33614 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 DATE 9. Capital Contributions 10. Amount of Capital Contributions \$51,00 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. 12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY A00000000733 DOCUMENT # STREET ADDRESS NAME KB INVESTMENT HOLDINGS, LTD. STREET ADDRESS 2226 S.R. 580 CITY-ST-21P CLEARWATER, FL 33763 GITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME U00000347040 STREET ADDRESS CITY - ST- ZIP 04/30/05-80099-012 141.25 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 DOCUMENT # STREET ADDRESS

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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

NAME STREET ADDRESS CITY-ST-ZIP