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

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	1. Entity Nam	MENT # A0200000° T FAMILY LIMITED PARTI			. 04 APR 30 AM 7:57 SECRETARY OF STATE TALLAHASSEE, FLORIDA					
100	Principal Place of Business 575 HIBISCUS LANE MIAMI, FL 33137		Mailing Address 575 HIBISCUS LANE MIAMI, FL 33137			<b></b>	E BIIL I BIIRK (1811 <b>bi</b> rk	65 BATHA BABBAN BA KUTA		
	2. Principal Place of Business		3. Mailing Address							
ŀ	Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		02032004 Cng-LP CR2E003 (10/03)				
ľ	City & State		City & State		4. FEI Number 11-3655	147		Applied For Not Applicable		
-	Zip	Zip Country Zip		Country '		5. Certificate of Statu			75 Additional	
ł		6. Name and Address of Current	Registered Agent			7. Name and Addres	s of New Re			
ļ	V. Harrie and Addises of Cutton Tregistered Agent				Name			g.r.eren rightt		
	LAWRENCE, DAVID R 6400 N. ANDREWS AVENUE, SUITE 320 FORT LAUDERDALE, FL 33309				Street Address (P.O. Box Number is Not Acceptable) One East Broward Blvd., Ste. 700					
					City Ft. Lauderdale FL 333301					
	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 Sgrature, typed or printed name of registered agent and little if applicable.									
	Capital Contributions as Shown on record.     \$25,000.00      To. Amount of Capital Contributions in FLORIDA to date.						₩			
Ì	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 declared that the declared by the state of t							. 3		
ŀ	12. GENERAL PARTNER INFORMATION			13.						
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I hereby 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 520, Florida Statutes

'I

GNATURE:

Augustus

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daylime Phone \* 305-5764292