

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A02000001235

1. Entity Name
 2421 INAGUA, LLLP



FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 JUN 17 PM 3:19

W06/23/04

Principal Place of Business
 C/O RAUL J. SALAS
 201 S. BISCAYNE BLVD., SUITE 1500
 MIAMI, FL 33131

Mailing Address
 C/O RAUL J. SALAS
 201 S. BISCAYNE BLVD., SUITE 1500
 MIAMI, FL 33131



2. Principal Place of Business
620 HARBOR CIRCLE

3. Mailing Address
620 HARBOR CIRCLE

01202004 Chg-LP CR2E003 (10/03)

City & State
KEY BISCAYNE FL

City & State
KEY BISCAYNE FL

4. FEI Number **37-1474145** Applied For
~~APPLIED FOR~~ Not Applicable

Zip **33149** Country **USA**

Zip **33149** Country **USA**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BATLEY INVESTMENTS, LLC
620 HARBOR CIRCLE
KEY BISCAYNE, FL 33149

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. **\$1,000.00**

10. Amount of Capital Contributions in FLORIDA to date **\$ 796,990.00**

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 #	L0000011458
NAME	BATLEY INVESTMENTS, LLC
STREET ADDRESS	620 HARBOR CIRCLE
CITY - ST - ZIP	KEY BISCAYNE, FL 33149
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
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NAME	
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CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
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CITY - ST - ZIP	

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06/24/04--01006--001 **526.25

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: By: Maria Cardenal

(305) 365 0044

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Maria Cardenal, Member

STAPLE CHECK HERE