



**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2005**

DOCUMENT # A02000001265 1. Entity Name BOCA HEIGHTS, LTD.					
Principal Place of Business 101 PINE CIRCLE BOCA RATON FL 33432		Mailing Address 101 PINE CIRCLE BOCA RATON FL 33432			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		Mailing Address C/O BERTRAM WASSERMAN 11704 DOVE HOLLOW AVENUE BOYNTON BEACH FL 33437-1698		<div style="font-size: 24px; font-weight: bold; margin-bottom: 10px;">FILED</div> <div style="font-size: 18px; font-weight: bold; margin-bottom: 10px;">2005 AUG 26 P 1:27</div>  <div style="font-weight: bold; margin-top: 5px;">1ST MOORE CR2E003 (10/04)</div>	
4. FEI Number 65-0934241				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent <div style="padding: 10px; font-weight: bold;"> WASSERMAN, BERTRAM 11704 DOVE HOLLOW AVENUE BOYNTON BEACH FL 33437-1698 </div>	
7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	
9. Capital Contributions as Shown on record. \$90,000.00		10. Amount of Capital Contributions in FLORIDA to date.		11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.	
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		
NAME	WASSERMAN, BERTRAM		CITY-ST-ZIP		
STREET ADDRESS	11704 DOVE HOLLOW AVENUE		CITY-ST-ZIP		
CITY-ST-ZIP	BOYNTON BEACH FL 33437-1698		STREET ADDRESS		
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CITY-ST-ZIP			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)(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: <i>Bertram Wasserman</i>			<i>BERTRAM WASSERMAN 8/26/05 561-703-3754</i>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytime Phone #</small>		

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