2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

Due by May 1, 2004							्रिक ० ०	
1. Entity Name	MENT # A0200000 FIRST, LTD.	(Signature)		04 MAR 16 PM 3: 03				
						Sec	,	7 <i>3:</i> 03
Principal Place of Business 3449 H0LLYW000 BLVD., 3011 380 H0H YW000 Ft. 33021 H0H YW000 Ft. 33021				360	TALLAHASSEE, FLORIDA			
HOLLYWOOD, FL. 330 21 HOLLYWOOD, FL. 330 21								
A B : :	(5)							
2. Principal Place of Business 18851 NE 29 HA OAL 18851 NE 2				ore				UK UUTUI INITOIN ON INU.
Suite, Apt.	900	Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-LP	CR2E003	(10/03)
City & State	YENTURA FL	City & State	KVENTURA, FI			232		Applied For Not Applicable
2ip 3380 Country USA		33\80	Zip 33180 Country USA		5. Certificate of Status Desired S8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
RGTH, LEONARDO A ESQ. Street Street					ROTH LEONBEDO A ESQ. didress (P.O. Box Number is Not Acceptable)			
HOLLS WOOD FT 33021				10051 116 0011 014 117 000				
				City ALLONTURED FL Zingocalle				
8. The above named entity submits this statement for the purgose of changing its registered office or registe					TU PA	in the State of I		iliar with, and accept
the obligations of registered agent								
Signature, typed or printed name of registered agent and title if applicable. DATE								
9. Capital Contributions as Shown on record. \$0.00 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								
DOCUMENT / NAME	AVONLEA DEVELOPMENT, CORP.			ADDRESS 1	3851 NE	2944	On su	ire 900
STREET ADDRESS CITY-SI-ZIP	3440-HOLENWOOD BEVDE 3501 E 350 HOLENWOOD FE 53021			T-ZIP	brew tur	W, PL 3	33180	
DOCUMENT # NAME			STREET	ADDRESS				
STREET ADDRESS CITY-ST-ZIP		7-44-44	CITY-S1	1-ZIP				
DOCUMENT ≠ NAME			STREET	ADDRESS	en	ഗരമാ	5642	SE.
STREET ADDRESS CITY-ST-ZIP			CITY-ST	T-ZIP	03/16/	′040108	3007	**526.50
DOCUMENT / NAME			STREET	ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY-ST	T-ZIP				
DOCUMENT #			STREET	ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY-S	-T-ZIP				
DOCUMENT#	1		STREET	ADDRESS				
STRE T ADDRESS CITY ST-ZIP	h		CITY-S		, , , , , , , , , , , , , , , , , , ,		1001	
14. 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 a curate 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 y execute this report as required by Chapter 620, Florida Statutes								
SIGNATURE: Fernando Hori Gidu, Director Tre Sujer Odd 24/04 786:279-0000								
Late Usygme rione #								