2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED **DOCUMENT # A02000001466** 2005 APR 27 PM 4:51 SOUTH BAYSHORE TOWER, LLLP ALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 25 SOUTHEAST 2ND AVENUE 25 SOUTHEAST 2ND AVENUE SUITE 900 SUITE 900 MIAMI, FL 33131 MIAMI, FL 33131 2. Principal Place of Business Two Alhambra Plaza Penthous 01192005 Chg-LP CR2E003 (10/03) City & State 4. FEI Number Applied For ora 55-0804737 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MURAI WALD BIONDO MORENO & BROCHIN, P.A. 25 SOUTHEAST 2ND AVENUE SUITE 900 MIAMI, FL 33131 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 SIGNATURE x printed name of registered agent and title if applicable. 9. Capital Contributions 10. Amount of Capital Contributions \$15,000,000.00 as Shown on record. in FLORIDA to date. 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY 13. DOCUMENT # P02000118281 STREET ADDRESS Two Alhambra PGZA, Penthouse 13 SOUTH BAYSHORE TOWER DEVELOPMENT, INC. STREET ADDRESS 25 SOUTHEAST 2ND AVENUE, SUITE 900 CITY-ST-7IP CITY-ST-ZIP MIAMI, FL 33131 DOCUMENT # STREET ADDRESS MAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST. 7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS HERE CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # CHECK STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT / STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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: SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING GENERAL PARTNER Date