


2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004

DOCUMENT # A03000000116		
1. Entity Name NRPII VENTURES, LLLP		

FILED

04 APR 30 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



MOORE CR2E003 (11/03)

Principal Place of Business 115 NW 167 STREET, #300 NORTH MIAMI BEACH FL 33169		Mailing Address 115 NW 167 STREET, #300 NORTH MIAMI BEACH FL 33169	
2. Principal Place of Business Suite One SE 3rd Avenue Suite 3100 City Miami, FL 33131 Zip		3. Mailing Address Suite, A One SE 3rd Avenue Suite 3100 City & S Miami, FL 33131 Zip	

4. FEI Number 74-3081113	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 TRACEY, GRANVIL M 115 NW 167 STREET, #300 NORTH MIAMI BEACH FL 33169		7. Name and Address of New Registered Agent Name Street One SE 3rd Avenue Suite 3100 City Miami, FL 33131 FL Zip Code	
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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.	11. MAKE CHECK PAYABLE TO FL DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 CITY-ST-ZIP	L03000000800 NEW RIVER II GP, LLC 115 NW 167 STREET, #300 NORTH MIAMI BEACH FL 33169	STREET ADDRESS CITY-ST-ZIP	One SE 3rd Avenue Suite 3100 Miami, FL 33131
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	800036403028 05/14/04--01060--029 **141.25
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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: GRANVIL TRACEY 4/27/04 905-654-1500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE