2005 LIMITED PARTNERSHIP ANNUAL REPORT

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	DOCUMENT # A0300000633 1. Entity Name THE CATAPANO INVESTMENTS LIMITED PARTNERSHIP					FILED				
						05 DEC - プ PH 3: 20				
,	Principal Place of Business Mailing Address 4357 WHITE CEDAR DR. % FRANK CATAPANO DELRAY BEACH, FL 33316 4357 WHITE CEDAR DR.				•	1	SEURL 155 FALLAHAS	RY OF STA SEE. FLO	ATE RIDA	
	DELRAY BEACH, FL 33445									
		ace of Business	3. Mailing Address 4357 WH	3. Mailing Address 4357 WHIH Less					100 1110 NATON BI 1001	
	Suite, Apt.	#, etc.	Sulte, Apt. #, etc.	Suite, Apt. #, etc.		11082005	Chg-LP	CR2E003	(10/03)	
	Delany BEAL		Or A my BL	Dr/Amy Blad F		4. FEI Number			Applied For Not Applicable	
	3344.	5 VSA	33445	Cour	ntry S A	5. Certificate of		Fee	.75 Additional Required	
-	6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent				
	WACHS, JEFFREY S ESQUIRE 1177 SE 3RD AVE.				Street Address (P.O. Box Number is Not Acceptable)					
	FT. LAUDERDALE, FL 33316									
•			•.		City			FL	Zip Code	
	The above named entity submits this statement for the purpose of changing its registered office or register the obligations of registered agent.						in the State of Flo	rida. I am fami	liar with, and accept	
	SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE									
	9. Capital Contributions 05 000 00 10. Amount of Capital Co				10 - 007 400/0\4\ C 0			.193(2)(b), F.S.,		
	as Shown on record. \$5,000.00 in FLORIDA to date. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGI					TERED AND AC	prior notice.			
	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 #				EET ADDRESS		ABBITESO CITI	MGEO ONE!		
STAPLE CHECK HERE	NAME STREET ADDRESS CITY-ST-ZIP	CATAPANO, FRANK 4357 WHITE CEDAR DR. DELRAY BEACH, FL 33316	СП		/-ST-ZIP					
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	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 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 a execute this report as equired by Chapter 620, Florida Statutes									
		Last Car y anomana whom have								
	SIGNAT	SIGNATURE AND TYPED O	R PRINTED NAME OF SIGNING GENER			1771 PT 11 CV	Date /	Daytim	ne Phone #	