2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

1. Entity Nar	ne	"# A03000001 DINGS, LTD.		7005 HAY -2 P 1: 18						
Principal Pla	Principal Place of Business Mailing Address						[00] 1.7.1	۷ ۱	4-10	
3250 MARY MIAMI, FL 3	ST, STE 50		3250 MARY ST, STE 500 MIAMI, FL 33133		SECRETARY OF STATE TALLAHASSEE, FLORICA					
2. Principal	Place of Bus	iness	3. Mailing Address							
Suite, Apt	. #, etc.		Suite, Apt. #, etc.			04222005	Chg-LP	CR2E003	3 (10/03)	
City & Sta	te		City & State		4. FEI Number 20-0484			Applied For Not Applicable		
Zip		Country	Zip Country		ntry		of Status Desired	□ \$8	8.75 Additional se Required	
	6. Nam	e and Address of Current	Registered Agent			7. Name and	Address of New F	legistered Ag	ent	
STEARNS	WEAVE	R MILLER WEISSLEF	R AI HADEFE &	Name						
SITTERS 150 W FL	ON, P.AI AGLER S	RICHARD E SCHATZ T, STE 2200			Street Address (P.O. Box Number is Not Acceptable)					
MIAMI, FL	. 33130									
					City	FL Zip Code				
		ity submits this statement fo stered agent.	r the purpose of changing its	register	ed office or register	ed agent, or both	n, in the State of Flo	orida. I am fan	niliar with, and accept	
SIGNATURE	SIGNATURE Signature, typed or printed name of registered agent and title If applicable.							DATE		
	9. Capital Contributions as Shown on record. \$264,848.00 10. Amount of Capital Contributions in FLORIDA to date. \$20,09									
	A	GENERAL PARTNER T	HAT IS A BUSINESS EN	TITY M	UST BE REGIST	ERED AND A	CTIVE WITH TH	IIS OFFICE.		
12.	NOTE	GENERAL PARTNER	i; an amendmen	t must be filed	ADDRESS CH	-	er.			
DOCUMENT #					EET ADDRESS					
NAME STREET ADDRESS	1	RY ST, STE 501							•***	
CITY-ST-ZIP		L 33133		CITY	'-ST-ZIP					
DOCUMENT / NAME	P020001 GB (KEY	33213 ' BISCAYNE) CORPORA	ATION	STRI	EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	1	RY ST, STE 501 L 33133		СПҮ	'- ST- ZIP					
DOCUMENT # NAME				STRI	EET ADDRESS	20 09/24	00055 2050107	1984	62 ************************************	
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CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME				STR	EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP									
indicated	f on this rep	ort is true and accurate and	this filing does not qualify for that my signature shall have is report as required by Chap	the same ter 620,	e legal effect as if m Florida Statutes	ade under oath;	that I am a Genera			
SIGNAT	SIGNATURE: SHERWED M. WEISER 4/27/2005 445- 4200 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTITIES Date Date Date Description Priorie #									