2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2005

STAPLE

SIGNATURE: 2

SECRETARY OF STATE DOCUMENT # A04000000270 DIVISION OF CORPORATIONS 1. Entity Name 05 FEB 18 AM 8: 41 THE CHEN REAL ESTATE LIMITED PARTNERSHIP Principal Place of Business Mailing Address 5219 N.W. 79TH WAY 5219 N.W. 79TH WAY PARKLAND FL 33067 PARKLAND FL 33067 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1ST MOORE CR2E003 (10/04) City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WACHS, JEFFREY S ESQ. Street Address (P.O. Box Number is Not Acceptable) 1177 S.É. 3RD AVENUE FT. LAUDERDALE FL 33316 Zip Code 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. 11. FILE NOW!!! Due by May 1, 2005 SIGNATURE See Block 11 instructions for fee info. Signature, typed or printed name of registered agent and title if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$5,000.00 in FLORIDA to date. 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. GENERAL PARTNER INFORMATION 12 ADDRESS CHANGES ONLY DOCUMENT # STREET ADDRESS NAME CHEN, YIH MIN STREET ADDRESS 5219 N.W. 79TH WAY CITY-ST-7IP CITY-ST-7IP PARKLAND FL 33067 DOCUMENT # STREET ADDRESS NAME CHEN, YING YING STREET ADDRESS 5219 N.W. 79TH WAY CITY-ST-ZIP CITY-ST-ZIP PARKLAND FL 33067 DOCUMENT # STREET ADDRESS NAME 800047476658 STREET ADDRESS CITY-ST-ZIP 03/01/05--01013--009 **141.25 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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

2/14/05 (454)971-6.78
Date Daytine Phone #