2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 7, 2005

Due by Se	eptember 7, 20		ens. Field	
DOCUMENT # A0400000400			DIVIS	CRETARY OF STATE TON OF CORPORATIONS
1. Entity Name			TOTAL CURPORATIONS	
COLÓRADO GEM INVESTMENT, LTD.			05	JUL 26 AM 8: 32
Principal Place of Business	Mailing Address		1	
545-7 DELANEY AVE.	545-7 DELANEY AVE.	•	-0	
ORLANDO, FL 32801	ORLANDO, FL 32801		alk	
Principal Place of Business Mailing Address Mailing Address				
Suite, Apt. #, etc. Suite, Apt. #, etc.			07142005 Chg-LP	CR2E003 (10/03)
City & State City & State		·	4. FEI Number	Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired	S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		Name	7. Name and Address of New Registered Agent	
THIER, CARL C		Name		
545-7 DELANEY AVE. ORLANDO, FL 32801		Street Address	Street Address (P.O. Box Number is Not Acceptable)	
		City		FL Zip Code
The above named entity submits this statement the obligations of registered agent.	t for the purpose of changing its re-	gistered office or registe	ered agent, or both, in the State of	Florida. I am familiar with, and accept
SIGNATURE	gent and title if applicable.			DATE
9. Capital Contributions as Shown on record. \$100.00 In FLORIDA to date.			In accorda the limited prior notice	ance with s. 607.193(2)(b), F.S., partnership did not receive the
	R THAT IS A BUSINESS ENTI		TERED AND ACTIVE WITH 1	THIS OFFICE.
	MAY NOT be changed on the NER INFORMATION	form; an amendme		LIANGES ONLY
DOCUMENT # P03000107618	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	STREET ADDRESS		MANGES UNLY ,
NAME WUPPERTAL INVESTMENT INC. STREET ADDRESS 545-7 DELANEY AVE.		STREET ADDRESS		
CITY-ST-ZIP ORLANDO, FL 32801		CITY-ST-ZIP	400058/ 	056154 3001 **141.25
DOCUMENT # NAME		STREET ADDRESS		
STREET ADDRESS - CITY-ST-ZIP		CITY-ST-ZIP		
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DOCUMENT # NAME		STREET AUDRESS		
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP		
DOCUMENT #		STREET ADDRESS		
STREET #DDRESS CITY-ST ₆ ZIP		CITY-ST-ZIP		
14. Lareby certify that the information supplied	with this filing does not qualify for the	he exemption stated in S	Section 119.07(3)(i), Florida Statute	es. I further certify that the information
indicated on this report is true and accurace 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:	C. Thier	(07/13/05	(40))245-8360
SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING GENERAL PARTNER Oate Dayme Phone #				