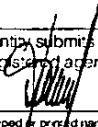


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 7, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUN 13 AM 9:46

DOCUMENT # A04000000924			
1. Entity Name BISCAYNE LOFTS, LTD.			
Principal Place of Business 18851 N.E. 29TH AVENUE, SUITE 900 AVENTURA, FL 33180		Mailing Address 18851 N.E. 29TH AVENUE, SUITE 900 AVENTURA, FL 33180	
2. Principal Place of Business 18151 NE 31 ST CT Suite, Apt. #, etc. 1015		3. Mailing Address 18151 NE 31 ST CT Suite, Apt. #, etc. 1015	
City & State AVENTURA FLORIDA		City & State AVENTURA FLORIDA	
Zip 33160	Country USA	Zip 33160	Country USA
4. FEI Number 20-1213170		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROTH, LEONARDO A ESQ. 18851 N.E. 29TH AVENUE, SUITE 900 AVENTURA, FL 33180		7. Name and Address of New Registered Agent Name JORGE SUMBRE Street Address (P.O. Box Number is Not Acceptable) 18151 NE 31 ST CT. # 1015 City AVENTURA FL Zip Code 33160	
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  JORGE SUMBRE PALEN DEVELOPMENT LLC GENERAL MANAGER 06-08-05 Signature, typed or printed name of registered agent and title if applicable. DATE			
9. Capital Contributions as Shown on record. \$798,000.00		10. Amount of Capital Contributions in FLORIDA to date.	
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	L03000011670 PALEN DEVELOPMENT, L.L.C. 18851 N.E. 29TH AVENUE, SUITE 900 AVENTURA, FL 33180	STREET ADDRESS CITY-ST-ZIP	18151 NE 31 ST CT # 1015 AVENTURA FL 33160
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS 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			
SIGNATURE:  JORGE SUMBRE PALEN DEVELOPMENT LLC GENERAL MANAGER 06-08-05 305 792 5247		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #	

STAPLE CHECK HERE