

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR -8 AM 8:32

DOCUMENT # A04000000976

1. Entity Name
PRESIDENTIAL SUITES INVESTMENTS III, LLLP



Principal Place of Business
2875 N.E. 191ST ST, STE 400
AVENTURA, FL 33180

Mailing Address
2875 N.E. 191ST ST, STE 400
AVENTURA, FL 33180

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01042005 Chg-LP CR2E003 (10/03)

4. FEI Number
20-1272133

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STEARNS WEAVER MILLER, ET AL
C/O RICHARD E. SCHATZ
150 W FLAGLER ST, STE 2200
MIAMI, FL 33130

7. Name and Address of New Registered Agent

Name Joan Papadakis

Street Address (P.O. Box Number is Not Acceptable)
2875 N.E. 191st Street

Suite 400

City Aventura

FL Zip Code 33180

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

Signature, typed or printed name of registered agent and title if applicable.

JOAN PAPADAKIS

2/28/05

DATE

9. Capital Contributions
as Shown on record. \$100.00

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

DOCUMENT # P04000092270
NAME PRESIDENTIAL SUITES INVESTMENTS III GP INC
STREET ADDRESS 2875 N.E. 191ST ST, STE 400
CITY-ST-ZIP AVENTURA, FL 33180

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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:

JOAN PAPADAKIS

2/28/05

305 370 71 00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE