




2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 7, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 AUG 19 AM 9:01

DOCUMENT # A04000001867					
1. Entity Name THE COELLO SPECIAL FAMILY LIMITED PARTNERSHIP					
Principal Place of Business 345 FT. LAUDERDALE BEACH BLVD., #307 FT. LAUDERDALE, FL 33304			Mailing Address 345 FT. LAUDERDALE BEACH BLVD., #307 FT. LAUDERDALE, FL 33304		
2. Principal Place of Business 345 N Fort Lauderdale Beach Blvd		3. Mailing Address 345 N Fort Lauderdale Beach Blvd		 08162005 Chg-LP CR2E003 (10/03)	
Suite, Apt. #, etc. Apt 307		Suite, Apt. #, etc. Apt 307			
City & State Fort Lauderdale, Florida		City & State Fort Lauderdale, Florida			
Zip 33304-4229		Country U.S.A.			
4. FEI Number		Applied For <input checked="" type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SLOTO, JAMES R ESQ. C/O SLOTO, GREENBERG & BERK, P.A. 200 S. BISCAYNE BLVD., SUITE 3000 MIAMI, FL 33131			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL 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.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$280,000.00		10. Amount of Capital Contributions in FLORIDA to date. \$ 280,000.00		In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.	
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 #	COELLO, JULIO C M.D.		STREET ADDRESS	345 N. Fort Lauderdale Beach Blvd # 307	
NAME	345 FT. LAUDERDALE BEACH BLVD., #307		CITY - ST - ZIP	Fort Lauderdale, FL 33304-4229	
STREET ADDRESS	FT. LAUDERDALE, FL 33304		STREET ADDRESS	800058959928	
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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.					
SIGNATURE: 			Julio C. Coello, MD 8-16-05 954-583-2590		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE