

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005


FILED

2005 APR 28 PM 1:45

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # A05000000002

1. Entity Name
 ROSCHMAN FAMILY PARTNERSHIP NO. 2 LTD.



Principal Place of Business
 6300 N.E. 1ST AVENUE
 SUITE 300
 FORT LAUDERDALE, FL 33334

Mailing Address
 6300 N.E. 1ST AVENUE
 SUITE 300
 FORT LAUDERDALE, FL 33334

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country



04262005 Chg-LP CR2E003 (10/03)

4. FEI Number Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

SADER, ROBERT L
 1901 W. CYPRESS CREEK ROAD
 SUITE 415
 FORT LAUDERDALE, FL 33309

7. Name and Address of New Registered Agent

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

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 #	L04000094100
NAME	JAR INVESTMENT, LLC
STREET ADDRESS	6300 N.E. 3RD AVENUE, SUITE 300
CITY-ST-ZIP	FORT LAUDERDALE, FL 33334
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
NAME	
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CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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CITY-ST-ZIP	

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 05/20/05-01043-018 **141.25

STAPLE CHECK HERE

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: John A. Roschman, Trustee John A. Roschman Rev. Trust Agr.
 112 121 83, Managing Member of Jar Investment, LLC, General Partner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #