
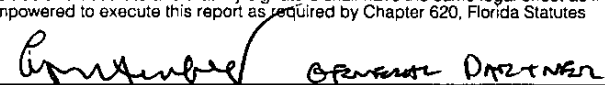


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR 25 AM 9:23

DOCUMENT # A06253					
1. Entity Name RAVENSWOOD WAREHOUSE INVESTORS, LTD.					
Principal Place of Business 18901 NE 29TH AVE STE. 100 AVENTURA, FL 33180			Mailing Address 18901 NE 29TH AVE STE. 100 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	4. FEI Number 59-1817533	
				Applied For 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		
DADE COUNTY CORPORATE AGENTS, INC. 18901 NE 29TH AVE STE. 100 AVENTURA, FL 33180			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. \$442,492.45			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		
NAME	FROMBERG, LYNN W.		CITY-ST-ZIP		
STREET ADDRESS	18901 NE 29TH AVE, STE. 100				
CITY-ST-ZIP	AVENTURA, FL 33180				
DOCUMENT #	NAME		STREET ADDRESS		
NAME	FROMBERG, MALCOLM H.		CITY-ST-ZIP		
STREET ADDRESS	18901 NE 29TH AVE., STE. 100				
CITY-ST-ZIP	AVENTURA, FL 33180				
DOCUMENT #	NAME		STREET ADDRESS		
NAME	GROSS, LESLIE JAY		CITY-ST-ZIP		
STREET ADDRESS	10471 S.W. 126TH ST.				
CITY-ST-ZIP	MIAMI, FL 33176				
DOCUMENT #	NAME		STREET ADDRESS		
NAME	COHEN, JEFFREY M.		CITY-ST-ZIP		
STREET ADDRESS	2601 S. BAYSHORE DR. PENTHOUSE 1B				
CITY-ST-ZIP	MIAMI, FL 33133				
DOCUMENT #	NAME		STREET ADDRESS		
NAME	SHORE, H. ALLAN		CITY-ST-ZIP		
STREET ADDRESS	1 GROVE ISLE DR., #1106				
CITY-ST-ZIP	COCONUT GROVE, FL 33133				
DOCUMENT #	NAME		STREET ADDRESS		
NAME			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: 			3/15/05 305-933-2000		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE