

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A06857

1. Entity Name
KENDALL CONTINENTAL, LIMITED



FILED
04 FEB -6 PM 12:36
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

Principal Place of Business
180 SOUTH BROADWAY
WHITE PLAINS, NY 10605

Mailing Address
7941 S.W. 104 STREET
MIAMI, FL 33156



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01192004 Chg-LP CR2E003 (10/03) **2/6**

4. FEI Number
~~58-1854913~~ **13-3796896** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MALE, MICHAEL H
3250 MARY STREET, SUITE 303
MIAMI, FL 33133

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

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

DATE

9. Capital Contributions as Shown on record. **\$990.00**

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 # **P94000086450**
 NAME **PRESIDENTIAL CONTINENTAL GARDENS CORP.**
 STREET ADDRESS **7941 SW 104TH ST**
 CITY-ST-ZIP **MIAMI, FL 33156**

STREET ADDRESS

CITY-ST-ZIP

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700029332687
02/25/04--01010--005 **141.25

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: **Jeffrey F. Joseph**

2/2/04

914-948-1300

STATE OF FLORIDA