## 2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2004

## Apr 09, 2004 08:00 AM - - Secretary of State DOCUMENT # A12507 1. Entity Name NUZZO & ASSOCIATES, LTD. Principal Place of Business Mailing Address 1351 SW 4TH COURT 1351 SW 4TH COURT BOCA RATON FL 33432 BOCA RATON FL 33432 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. GR2E003 (11/03) City & State City & State 4. FEI Number Applied For 59-2178275 Not Applicable Zιp Country Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NUZZO, MARK J. Street Address (P.O. Box Number is Not Acceptable) 1351 S.W. 4TH CT. **BOCA RATON FL 33432** City 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 primed name of registered agent and title if applicable 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 9. Capital Contributions \$2,000.00 as Shown on record. in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. P01000039817 DOCUMENT # STREET ADDRESS U00000115017 NU BUILDINGS, INC. NAME 04/15/04-80007-008 150.00 STREET ADDRESS 1351 SW 4TH COURT CBY-ST-7P CXTY - ST - 23P **BOCA RATON FL 33432** DOCUMENT # STREET ADDRESS NAME STREET ADDRESS. CITY+ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS MAME STREET ADDRESS CITY-S7-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-78P CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CSTY-ST-78P CITY - ST - ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CXTY-ST-ZIP CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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.

MARK NUZZO

SIGNATURE:

**FILED** 

561 393 6605