

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
 2004 APR 26 AM 9:31
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # A17405 1. Entity Name SIGNATURE GARDENS LTD.					
Principal Place of Business 12725 S.W. 122ND AVENUE MIAMI, FL 33186			Mailing Address 6900 STATE ROAD 84 DAVIE, FL 33317		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 12725 S.W. 122 AVE.			
City & State		City & State MIAMI, FL			
Zip	Country	Zip 33186	Country	4. FEI Number 59-2480157	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BERLIN, JEROME C. 12725 SW 122ND AVENUE MIAMI, FL 33186			7. Name and Address of New Registered Agent Name: SAM MANCUSD Street Address (P.O. Box Number is Not Acceptable): 6900 STATE ROAD 84 City: DAVIE FL Zip Code: 33317		
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: <small>Signature, typed or printed name of registered agent and title if applicable.</small>			900036282879 05/14/04--01007--004 **526.25 <small>DATE</small>		
9. Capital Contributions as Shown on record. \$3,200,000.00			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 # NAME STREET ADDRESS CITY-ST-ZIP	G10998 DEUX MICHEL, INC. 12725 S.W. 122ND AVENUE MIAMI, FL		STREET ADDRESS CITY-ST-ZIP		
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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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			TREATY: DEUX MICHEL, INC DAVID G. STINE GEN PTR 4/23/04 (954) 424-4000 <small>Date Daytime Phone #</small>		

STAPLE CHECK HERE