2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CHECK

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SIGNATURE:

FILED DUE BY MAY 1, 2005 Apr 22, 2005 8:00 am Secretary of State DOCUMENT # A18871 OCEAN WORLD ASSOCIATES, LTD. Principal Place of Business Mailing Address C/O C. RONALD BLEZNAK 124 VICTORY DRIVE JUPITER FL 33477 C/O THE AMERIMAR REALTY COMPANY 210 WEST RITTENHOUSE SQUARE, SUITE 19 PHILADELPHIA PA 19103 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1ST MOORE CR2E003 (10/04) Applied For City & State City & State 4. FEł Number 58-1588809 Not Applicable Country Zip Country Zip \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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. 11. FILE NOW!!! Due by May 1, 2005. SIGNATURE See Block 11 instructions for fee info. Signature, typed or printed name of registered agent and title if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$100,000.00 as Shown on record. 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 # P94000047366 STREET ADDRESS NAME GENOWA GP, INC. C/O 210 WEST RITTENHOUSE SQ., STE. 1900 STREET ADDRESS CITY-ST-ZIP CITY-ST-21P PHILADELPHIA PA 19103 DOCUMENT # STREET ADDRESS 200054118122 05/03/05--01085--012 **141.25 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DUCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CHTY-ST-ZIP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STRACT ADDRESS CITY-ST-ZIP CITY:-ST-ZIP 14. I hereby 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

CEO Senova Inc @ SP/Ocean Ub/ld