2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

## FILED Apr 30, 2005 08:00 AM Secretary of State

| DOCUMENT #Ã21811  1. Entity Name LE JEUNE EXECUTIVE BUILDING, LTD.   |  |  |  |   | Secretary of State  |
|--|--|--|--|---|---|
| Principal Place of Business  351 N.W. LEJEUNE ROAD, SUTE 600  MIAMI, FL 33126  Mailing Address  351 N.W. LEJEUNE ROAD, SUTE 600  MIAMI, FL 33126 |  |  |  | E 600   |   |
| 2. Principal P   | lace of Business   | 3. Mailing Address   |  | <del></del>   |   |
| Suite, Apt #, etc  |  | Suite, Apt. #, etc.  |  |   | 02032005 Chg-LP CR2E003 (10/03)   |
| City & State   |  | City & State   |  |   | 4. FEI Number         Applied For           59-2792058         Not Applicable   |
| Zip Country  |  | Zip Country  |  | ntry  | 5. Certificate of Status Desired  |
| 6. Name and Address of Current Registered Agent  |  |  |  | Name  | 7. Name and Address of New Registered Agent   |
| BURGER, ALAN M ESQ.<br>% BURGER & TRAILOR, P.A.  |  | Street Ado   |  | Street Address (  | (P.O. Box Number is Not Acceptable)   |
| 8603 S. DI.<br>MIAMI, FL   | XIE HWY,, #303 —<br>33143  |  |  |   |   |
|  |  | <del>v</del>   |  | City  | FL Zip Code   |
| 8. The above the obligat   | named entity submits this statement to<br>ions of registered agent.  | or the purpose of changing   | its registe                              | red office or register  | red agent, or both, in the State of Florida. I am familiar with, and accep  |
| SIGNATURE .  | Signature, lyped of printed name of registered agen  |  | <del></del>                              | <del></del>   | DATE  |
| 9. Capital Co<br>as Shown  |  | 10. Amount of Ca<br>in FLORIDA to  |  | ibutions  | DATE  |
|  | A GENERAL PARTNER NOTE: General Partners M   | THAT IS A BUSINESS!<br>AY NOT be changed or  | ENTITY Notes that the second in the form | MUST BE REGIS<br>n; an amendmer                                 | TERED AND ACTIVE WITH THIS OFFICE. nt must be filed to change a general partner.  |
| 12.  | GENERAL PARTNE   | R INFORMATION  | 13.                                      | ·   | ADDRESS CHANGES ONLY  |
| NAME<br>NAME   | JORME CORPORATION  |  | ा डाह                                    | REET ADDRESS  |   |
| STREET ADDRESS<br>CITY-ST-ZIP  | ,  |  | CITY-ST·ZIP                              |   |   |
| DOCUMENT #   |  |  | STF                                      | REET ADDRESS  | U00000346250  |
| STREET ADORESS CITY - ST - ZIP   | ıs   |  | CIT                                      | Y-ST-ZIP  | 04/30/05-80069-005 141.25   |
| DOCUMENT #   | ***  | ,=   | -SH                                      | REET ADDRESS  |   |
| STREET ADDRESS<br>CITY ST ZIP  |  |  | сп                                       | Y-ST-ZIP  |   |
| DOCUMENT #<br>NAME   |  |  | STF                                      | REET ACIDRESS   |   |
| STREET ADDRESS<br>City-St-Zip  |  |  | СІТ                                      | Y-ST-7IP  |   |
| DOCUMENT #   | ,  |  | STF                                      | REET ADDRESS  |   |
| STREET ADDRESS<br>CITY - ST - ZIP  |  |  | CIT                                      | Y-ST-ZIP  |   |
| DOCUMENT #<br>NAME   |  | , - , - <del>, - , - , - , - , - , - , - , -</del>   | STI                                      | REET ADDRESS  |   |
| STREET ADDRESS<br>City-St-Zip  |  |  | L_                                       | Y-SI-ZIP  |   |
| 14. Thereby a indicated the recent   | certify that the information supplied will on this report is true and accurate an ver or trustee empowered to execute the contract of the cont | th this filling does not qualify<br>d that my signature shall ha<br>his report as required by Ch | for the exitive the san<br>hapter 620,   | erription stated in Some legal effect as if in Florida Statutes | ection 119.07(3)(f), Florida Statutes. I further certify that the information made under oath; that I am a General Partner of the limited partnership  YE 2- MED/WP)  4/8/05 (305) 643_5040 |
| SIGNAT   | TURE: YORKUL !   | OF   | CPK                                      | -en   | 4/1/05 (305)643,5040  |