<u> </u>	
-	
-	
- 1	

STAPLE

SIGNATURE

20)4 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

Jun 01, 2004 08:00 AM Secretary of State DOCUMENT # A23596 1. Entity Name ANAMI INVESTMENT, LTD. Principal Place of Business Mailing Address **104 VALENCIA DR 104 VALENCIA DR** ISLAMORADA, FL 33036 ISLAMORADA, FL 33036 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04292004 Cho-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For 59-2748337 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JASMIN INVESTMENT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 104 VALENCIA DR ISLAMORADA, FL 33036 City Zip Code FL 8. The above named antity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registored agent and title if applicable. DATE 9. Capital Contributions 10. Amount of Capital Contributions \$161,571,95 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 filled to change a general partner 12 GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY M37542 DOMESTICATION OF STREET ADDRESS JASMIN INVESTMENT CORP. NAME STREET ADDRESS 104 VALENCIA DR. CITY-ST-7P CITY-ST-ZIP ISLAMORADA, FL 33031 DOCUMENT # STREET ADDRESS 000000162036 06/03/04-80005-007 535.00 STREET ADDRESS CITY - ST - ZIP CITY-ST-ZP DOCUMENT # STREET ADDRESS STREET ADDRESS Caty-SI-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7P CITY-ST-ZIP DOCUMENT # STREET ADDRESS. MAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP DOCUMENT # STREET ADDRESS HAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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, Ronda Statutes 4. **August **The Company of the Company

FILED