



2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

DOCUMENT # A23835 1. Entity Name PEMBROKE PINES ASSOCIATES, L.P., LIMITED PARTNERSHIP						APR 19 PM 1:43 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 65 WEST 36TH STREET SUITE 1200 NEW YORK, NY 10018				Mailing Address 65 WEST 36TH STREET SUITE 1200 NEW YORK, NY 10018			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country					
4. FEI Number 13-3400086				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
GUNSTER, YOAKLEY & STEWART, P.A. 2 SOUTH BISCAYNE BLVD., SUITE 3400 ATTN: EDGAR LEWIS MIAMI, FL 33131-1897				Name Valdes - Fauli Corporate Services Inc. Street Address (P.O. Box Number is Not Acceptable) 2. South Biscayne Blvd. Suite 3400 City Miami FL Zip Code 33131			
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 <u><i>Valdes - Fauli Corporate Services</i></u> DATE <u><i>4/5/05</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>							
9. Capital Contributions as Shown on record. \$2,000,000.00				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 # M97000000651 NAME H & G II ASSOCIATES, L.L.C. STREET ADDRESS 65 WEST 36TH STREET SUITE 1200 CITY-ST-ZIP NEW YORK, NY 10018				STREET ADDRESS CITY-ST-ZIP 700054031867 05/06/05--01115--004 **535.00			
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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: <u><i>Edgar Lewis</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>				Date <u><i>4/5/05</i></u> <small>Daytime Phone #</small>			

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