2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) **DUE BY MAY 1, 2004**

the receiver or trustee empoy

SIGNATURE

FILED Feb 09, 2004 08:00 AM Secretary of State DOCUMENT # A24062 1. Entity Name DERMER INVESTMENTS COMPANY, LTD. Principal Place of Business Mailing Address % BURTON DERMER % BURTON DERMER 1180 S. OCEAN BLVD., #8E BOCA RATON FL 33432 1180 S. OCEAN BLVD., #8E BOCA RATON FL 33432 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc MOORE CR2E003 (11/03) Applied For City & State City & State 4. FEI Number 59-2753124 Not Applicable Zip Country 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 DERMER INVESTMENTS COMPANY, INC. Street Address (P.O. Box Number is Not Acceptable) % BURTON DERMER 1180 S. OCEAN BLVD., #8E **BOCA RATON FL 33432** City 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 SIGNATURE Signature: typed or printed name of registeriou agent and title if applicable. DATE 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 9. Capital Contributions \$1,996,071.60 in FLORIDA to date. as Shown on record. SEE REVERSE SIDE FOR FEE INFORMATION 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY DOCUMENT # STREET ADDRESS DERMER INVESTMENTS COMPANY, INC. NAME STREET ADDRESS % 2601 S. BAYSHORE DR., SUITE 1600 CITY-ST-ZIP CITY: ST- ZIP **MIAMI FL 33133** DOCUMENT # STREET ADORESS NAME * - - 1097-009 526.25 STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP DOCUMENT # STHEET ADDRESS NAME STREET ADDRESS CITY- ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP h his filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information of that my eignature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or as required by Chapter 620, Florida Statutes 14. I hereby certify that the information supplies

BUNTON DENMEN