

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A24104 1. Entity Name PALM BEACH DEVELOPMENT AND SALES, LTD.						FILED 04 APR 30 PM 12:25 SECRETARY OF STATE TALLAHASSEE, FLORIDA 	
Principal Place of Business 2601 BISCAYNE BLVD. MIAMI, FL 33137				Mailing Address 2601 BISCAYNE BLVD. MIAMI, FL 33137			
2. Principal Place of Business				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent PALM BEACH DEPT. & SALES CORP 2601 BISCAYNE BLVD. MIAMI, FL 33137				7. Name and Address of New Registered Agent Name <u>Antonio Rodriguez</u> Street Address (P.O. Box Number is Not Acceptable) <u>2601 Biscayne Blvd.</u> City <u>MIAMI</u> FL <u>33137</u>			
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>[Signature]</u> DATE <u>4/28/04</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>							
9. Capital Contributions as Shown on record. \$250,000.00				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 #	305733			STREET ADDRESS			
NAME	PALM BEACH DEPT. & SALES			CITY - ST - ZIP			
STREET ADDRESS	2601 BISCAYNE BLVD.			STREET ADDRESS			
CITY - ST - ZIP	MIAMI, FL			CITY - ST - ZIP			
DOCUMENT #				STREET ADDRESS			
NAME				CITY - ST - ZIP			
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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; the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: [Signature]

STAPLE CHECK HERE