

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

DOCUMENT # A28863

1. Entity Name

ABE GROUP ENTERPRISES LIMITED PARTNERSHIP



FILED

04 MAR 17 AM 8:43

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MMJ



MOORE CR2E003 (11/03)

3/17

Principal Place of Business PAUL GNATT, CPA 7401 WISCONSIN AVENUE #1012 BETHESDA MD 20814 1515a Comfort Suites 1800 S. Federal Highway Fort Lauderdale, FL 33316		Mailing Address 3440 HOLLYWOOD BLVD., STE. 450 HOLLYWOOD FL 33021	
2. Principal Place of Business Fort Lauderdale, FL 33316		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 52-1666119	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GRAND, LEONARD ESQ. 3440 HOLLYWOOD BLVD., SUITE 450 HOLLYWOOD FL 33021	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$30.00	10. Amount of Capital Contributions in FLORIDA to date. \$30.00	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION.
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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 # NAME STREET ADDRESS CITY-ST-ZIP	P98000028694 ABE GROUP ENTERPRISES, INC. ✓ 3440 HOLLYWOOD BLVD., #450 HOLLYWOOD FL 33021	STREET ADDRESS 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 or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: ABE GROUP ENTERPRISES, INC.
By Leonard Grand, President
1/28/04 (954) 989-2889
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE