2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED May 06, 2004 08:00 AM Secretary of State

DOCUMENT # A29828 1. Entity Name SAW-BAN, LTD.							;	Secret	ary of Sta	
1500 W. CYPRESS CREEK RD. 1 SUITE #409 S			Mailing Address 1500 W. Cypress Creek Rd. Suite #409 Ft. Lauderdale, Fl. 33309				TOLK FOREI ROLLO WOOR	UCC CIUCA UIUCA UIUCA	C BYRN BYRYN GYBYNGY RA NGGY	
2. Principal Place of Business 3. Mailing Addr			iling Address	dress						
Suite, Apt #, etc			Suite, Apt #, etc			02232004	Chg-LP	CR2E0	03 (10/03)	
City & State	÷	City	City & State			4. FEI Number 65-0184			Applied For Not Applicable	
Zip	Country	Zıp		Country			of Status Desired		\$8.75 Additional	
	6. Name and Address of Curre	ent Register	ed Agent		Name	7. Name and	Address of New			
BRENNER, SCOTT 1500 W. CYPRESS CREEK RD. SUITE #409				_		reet Address (P.O. Box Number is Not Acceptable)				
FT. LAUDE	RDALE, FL 33309			-	City				Zip Code	
8. The above	named entity submits this statemen	nt for the purp	pase of changing it			red agent, or both	n, in the State of F	FL Florida, Lam f		
	ons of registered agent.									
SIGNATURE -	Signature, typed or printed hame of registered a	gent and little if ap	picable					DATE		
9. Capital Cor as Shown o	on record. \$5,197,500.00		(0. Amount of Capi in FLORIDA to d	date. 5	197,500					
	A GENERAL PARTNE NOTE: General Partners	MAY NOT	be changed on	the form;			i to change a	general par	tner.	
DOCUMENT #	GENERAL PARTI	NER INFORM	IATION	13.			ADDRESS CI	HANGES ONL	Y	
TAME TREET ADDRESS	DIG-USA, INC. 7601 DUNLEER WAY			ſ	ADDRESS					
11Y-S1-ZIP	DALLAS, TX 75248			CiTY-S1	- ZIP		10000 1 05/13/0 -	0016036: 4 -80019	3 -001-141.25-	
OCUMENT # AME				STREET	ADDRESS					
Treet address ! :ity-st-zip				CITY-SI	-21P					
OCUMENT #				STREET	ADDRESS					
TREET ADDRESS				CITY-ST	ZIP				······································	
OCUMENT #				STPEET	ADGRESS					
NAME STREET ADDRESS				GITY-ST	ZIP					
DOCUMENT #			<u> </u>	CIDELI	ADDRESS				<u> </u>	
iame Street address										
ITY-ST-ZIP				GITY-SI	- 2114					
NAME STREET ADDRESS				STREET	ADDRESS					
CITY - ST - ZIP				CITY-SI						
14.) hereby of indicated the receiv	iertify that the information supplied on this report is true and accurate or or trustee empowered to execut	with this filling and that my s e this report a	signature shall have as required by Chal	e the same le pter 620 Flo	egal effect as if n rida Stalutes	ection 119.07(3)(i) nade under oath;	that I am a Gene	eral Partner of	the limited partnership	