


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

DOCUMENT # A30227 1. Entity Name TATE PARTNERSHIP, LTD.	
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FILED

2004 JUN -8 P 3: 18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 1175 NE 125TH STREET, SUITE 102 NORTH MIAMI, FL 33161		Mailing Address 1175 NE 125TH STREET, SUITE 102 NORTH MIAMI, FL 33161	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0090398		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TATE, STANLEY G. 1175 NE 125TH STREET, SUITE 102 NORTH MIAMI, FL 33161		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
9. Capital Contributions as Shown on record. \$100.00		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 #	M52042	STREET ADDRESS	
NAME	KEN JAM, INC.	CITY-ST-ZIP	
STREET ADDRESS	1175 NE 125TH STREET, SUITE 102		
CITY-ST-ZIP	NORTH MIAMI, FL 33161		
DOCUMENT #		STREET ADDRESS	
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STREET ADDRESS			
CITY-ST-ZIP			

*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:  **5/25/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE