


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # A31695					
1. Entity Name TRADEPORT PROPERTY, LTD.					
Principal Place of Business 7280 W. PALMETTO PARK RD., STE. 306N BOCA RATON, FL 33433			Mailing Address 7280 W. PALMETTO PARK RD., STE. 306N BOCA RATON, FL 33433		
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 65-0267406	
				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 BEAVER PROPERTIES, INC. 7280 W. PALMETTO PARK ROAD SUITE 306N BOCA RATON, FL 33433				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 _____ <small>Signature typed or printed name of registered agent and title if applicable</small>					
DATE _____					
9. Capital Contributions as Shown on record \$2,215,363.00			10. Amount of Capital Contributions in FLORIDA to date. \$2,016,364.00		
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 #	S60091		STREET ADDRESS		
NAME	ABDO INVESTMENTS, INC		CITY - ST - ZIP		
STREET ADDRESS	7280 W. PALMETTO PK. RD., STE. 306N		U00000158477 05/07/04-80023-015 536.25		
CITY - ST - ZIP	BOCA RATON, FL 33433				
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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: _____ Joseph Sabga			04/27/2004 (561)392-2777		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE