## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

## Mar 04, 2004 08:00 AM DOCUMENT # A93000000214 **Secretary of State** SITCO DEVELOPMENT LIMITED PARTNERSHIP Principal Place of Business Mailing Address 3109 STIRLING ROAD 3109 STIRLING ROAD FT. LAUDERDALE, FL 33312 FT. LAUDERDALE, FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 02132004 Cha-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For 65-0548239 Not Applicable Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HOLLANDER, DAVID Street Address (P.O. Box Number is Not Acceptable) 3109 STIRLING ROAD FT. LAUDERDALE, FL 33312 City Zio 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, typed or printed name of registered agent and title if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$99.00 in FLORIDA to date. as Shown on record. 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY 13. G95058 DOCUMENT # STREET ADDRESS NAME SILVER DEVELOPMENT CORP. STREET ADDRESS 3109 STIRLING ROAD CITY-ST-ZIP U000000087578 CITY-ST-ZIP FT. LAUDERDALE, FL 33312 <del>03/15/04-80014-020-141.25</del> DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CETY - ST - 7/2 CITY-ST-ZIP DOCUMENT A STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-57-782 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CRY-ST-7IP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 the execute init epoint as required by Chapter 620, Florida Statutes.

G.P. President

SIGNATURE:

Silver Dev. Cord

FILED