
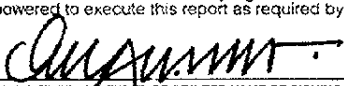


**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

**FILED**  
**Apr 05, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A93000000787</b>			
1. Entity Name <b>BAMCO SERVICE STATION, LIMITED PARTNERSHIP</b>			
Principal Place of Business <b>10050 STIRLING ROAD COOPER CITY, FL 33328</b>		Mailing Address <b>1492 E. BROWARD BLVD. FT. LAUDERDALE, FL 33301</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent  <b>ANGEL T. FRANCO 1492 E. BROWARD BLVD. FT. LAUDERDALE, FL 33301</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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. <b>\$500,000.00</b>		10. Amount of Capital Contributions in FLORIDA to date.	
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>			
<b>12. GENERAL PARTNER INFORMATION</b>		<b>13. ADDRESS CHANGES ONLY</b>	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	<b>P99000009268 ENERGY ENTERPRISES COOPER CITY, INC 10050 STIRLING ROAD COOPER CITY, FL 33024</b>	STREET ADDRESS CITY - ST - ZIP	<b>U000000111149 04/13/04-80004-014 526.25</b>
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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)(f), 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: 		<b>03/30/04</b> <b>(954) 523-9609</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date Defunct Phone #	

STAPLE CHECK HERE