<u>200</u> LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED Apr 19, 2004 08:00 AM Secretary of State

DOCUMENT # A9300000865 1. Entity Name ROCK & RAN HOLDINGS, LTD.						Secret	tary of State
Principal Pla	ce of Business	Mailing Address					
1724 VESTAL DRIVE CORAL SPRINGS, FL 33071		1724 VESTAL DRIVE CORAL SPRINGS, FL 33071			#8## 18773 ##888 ##188 ##	(17] 電磁(1) 磁磁(1) 磁磁(磁) (磁) (磁) (磁) (磁)	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt #, etc.		Suite, Apt. #, etc.			04132004	Chg LP	CR2E003 (10/03)
City & State		City & State			4. FEI Number 65-0431		Applied For Not Applicable
Zip	Country	Zip	Cour	atry		f Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
KRAMER, ROBERT M C/O KRAMER & ZUCKERMAN, P.A. 40000 HOLLYWOOD BLVD., SUITE 485 SO. HOLLYWOOD, FL 33021				Name Street Address (P.O. Box Number is Not Acceptable)			
I TOLL I W	30021		City				FL Zip Code
the obliga	ations of registered agent. Signature, typed or printed name of registered agent.				ed agent, or both	, in the State of Fi	orida. I am familiar with, and accept
as Shown on record. \$200,000.00 in FLORIDA to date.					TEDED AND A	OTIME MITTER	SIC OFFICE
	A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGIST NOTE: General Partners MAY NOT be changed on the form; an amendmen					to change a g	eneral partner.
12.	GENERAL PARTI	NER INFORMATION	13.			ADDRESS CH	ANGES ONLY
DOCUMENT # NAME STREET ADDRESS	GRASSO, RANDY B 1724 VESTAL DRIVE CORAL SPRINGS, FL 33071			EET AODRESS	N00000100014		
DOCUMENT #			_	ET ADDRESS	000000133614 04/27/04=80094=025 526.25		
NAME STREET ADDRESS CITY-ST-ZIP			eny	-ST-7/P			
BOCUMENT #			SIFI	ET ADORESS			
STREET ADDRESS CITY-ST-ZIP			CETY	-ST-ZIP			
DOCUMENT # NAME STREET ADDRESS			Ī	TET ADDRESS			
CITY-ST-ZIP				-ST-ZIP		······································	
GITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS GITY-ST-ZIP DOCUMENT # NAME				-SI-ZIP		·	
			SIR	LET ADDRESS			
STREET ADDRESS CRTY+ST-ZIP				-ST-21P			
14. I hereby indicate the rece	certify that the information supplied videnthing report is true and accurate a verior trustee empowered to execute verior trustee empowered to execute	vith this filing does not qualify and that my signature shall he this report as required by C	y for the exe ave the sam hapter 620,	mption stated in Se e legal effect as if m Florida Stalutes	ction 119 07(3)(I), lade under oath; I	, Florida Statutes. that I am a Gener	I further certify that the information al Partner of the limited partnership or