2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9300000865 1. Entity Name ROCK & RAN HOLDINGS, LTD.					O3 APR 29 AM 8: 35		
Principal Place 1724 VESTAL (CORAL SPRING	DRIVE	Mailing Address 1724 VESTAL DRIVE CORAL SPRINGS FL 33071		ĺ .	RETARY OF STATE AHASSEE FLORIDA		
2. Principal Place of Business 3. Mailing Address					14129 IIIIIIII	814 1818) 11111 118111 68111 68111 66 111 6	
Suite, Apt.	Suite, Apt. #, etc.	, Apt. #, etc.		DUE BY MAY 1, 2003			
City & State		City & State	City & State		4. FEI Number	65-0431885	Applied For Not Applicable
Zip	Country Zip		Country		5. Certificate o	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				Name			
C/O KRAMER & ZUCKERMAN, P.A.				Street Address (P.O. Box Number is Not Acceptable)			
40000 HOLLYWOOD BLVD., SUITE 485 SO.							
HOLLYWOOD FL 33021				City Zip Code			
	named entity submits this statement fo ons of registered agent.	r the purpose of changing its	registere	ed office or register	red agent, or both,	in the State of Florida. I am fa	amiliar with, and accept
SIGNATURE -	Signature, typed or printed name of registered agent a	and title if applicable.				DATE	
Capital Cor as Shown o		10. Amount of Capital in FLORIDA to display			18 O	11. MAKE CHECK PAYABLE SEE HEVERSE SIDE FOR	
	A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS EN Y NOT be changed on th	TITY M	UST BÉ REGIS ; an amendmen	TERED AND AC	TIVE WITH THIS OFFICE	ner.
12.	GENERAL PARTNER		13.			ADDRESS CHANGES ONL	
	GRASSO, RANDY B 1724 VESTAL DRIVE CORAL SPRINGS FL 33071		STRE	STREET ADDRESS			
			CITY	'-ST-ZIP			
DOCUMENT # NAME			STRE	ET ADDRESS	901	<u> </u>	59 *For or
STREET ADDRESS CITY-ST-ZIP	3			04/29/03 01034 024 **526.25			
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14. Lhereby ce	ertify that the information supplied with	this filing does not qualify for	the ever	notion stated in Se	ction 119 07(3)(i)	Florida Statutes, J further certi-	furthat the information

I nereby 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 to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

04-13-03

Daytime Phone #