

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 7, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUL 29 AM 8:59

DOCUMENT # A93000001199

1. Entity Name
HYJON LIMITED PARTNERSHIP



Principal Place of Business
521 E. MT. VERNON DRIVE
PLANTATION, FL 33325

Mailing Address
521 E. MT. VERNON DRIVE
PLANTATION, FL 33325

2. Principal Place of Business

3. Mailing Address

HYJON LTD. PART
12490 S.W. 20th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
DAVIE, FL

Zip

Country

Zip

Country

33325 U.S.A.

06302005

Chg-LP

CR2E003 (10/03)

4. FEI Number

65-0450723

Applied For

Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GILMORE, JOHN NATHAN
720 FAIRWAY DRIVE
PLANTATION, FL 33317

7. Name and Address of New Registered Agent

Name
JOHN NATHAN GILMORE
Street Address (P.O. Box Number is Not Acceptable)
12490 S.W. 20th Street
City
DAVIE FL Zip Code
33325

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

John Gilmore

DATE

9. Capital Contributions
as Shown on record. \$326,155.00

10. Amount of Capital Contributions
in FLORIDA to date.

326,155

06/30/05

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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
GILMORE, JOHN NATHAN
521 EAST MOUNT VERNON DR.
PLANTATION, FL 33325

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP
12490 S.W. 20th Street
DAVIE, Florida, 33325

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
200058258392
08/04/05--01052--016 **935.00

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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:

John Gilmore

06/30/05 954-472-6997

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE