

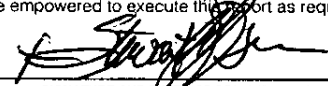


# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## Due By May 1, 2005

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 MAR -7 AM 9:21

|   |  |   |   |  |  |
|---|--|---|---|--|--|
| <b>DOCUMENT # A93000001224</b><br>1. Entity Name<br><b>ATLANTIC TRUSS COMPANY, LTD.</b>   |  |   |   |   |  |
| Principal Place of Business<br><b>850 N.W. 61 STREET<br/>FT. LAUDERDALE, FL 33309</b>   |  |   |   | Mailing Address<br><b>850 N.W. 61 STREET<br/>FT. LAUDERDALE, FL 33309</b>  |  |
| 2. Principal Place of Business<br><b>2700 W CYPRESS CREEK RD</b><br>Suite, Apt. #, etc.<br><b>D-122</b>   |  | 3. Mailing Address<br><b>2700 W CYPRESS CREEK RD</b><br>Suite, Apt. #, etc.<br><b>D-122</b> |   |    |  |
| City & State<br><b>FT. LAUDERDALE, FL</b>   |  | City & State<br><b>FT. LAUDERDALE, FL</b>   |   | 4. FEI Number<br><b>65-0340350</b>   |  |
| Zip<br><b>33309</b>   |  | Country<br><b>USA</b>   |   | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>ASMUS, STEWART A<br/>135 N.W. 99 WAY<br/>CORAL SPRINGS, FL 33071</b>  |  |   |   | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable.</small>  |  |   |   |  |  |
| 9. Capital Contributions as Shown on record. <b>\$1,500.00</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><br><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 # <b>P93000006517</b><br>NAME <b>ATLANTIC TRUSS COMPANY</b><br>STREET ADDRESS <b>850 N.W. 61 STREET</b><br>CITY-ST-ZIP <b>FORT LAUDERDALE, FL 33309</b>  |  |   | STREET ADDRESS <b>2700 W CYPRESS CREEK RD D-122</b><br>CITY-ST-ZIP <b>FT LAUDERDALE, FL 33309</b> |  |  |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  |   | STREET ADDRESS<br>CITY-ST-ZIP   |  |  |
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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)(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:   |  |   | <b>STEWART A. ASMUS</b><br><b>CORP DTR</b>  |  |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  |  |   | Date <b>12-4-05</b> Daytime Phone # <b>954-491-3310</b>   |  |  |

STAPLE CHECK HERE