

**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004**

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # A95000000459	
1. Entity Name GREEN VISTA APARTMENTS, LTD.	

Principal Place of Business 9155 SOUTH DADELAND BLVD SUITE 1812 MIAMI FL 33156	Mailing Address 9155 SOUTH DADELAND BLVD SUITE 1812 MIAMI FL 33156
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E003 (11/03)

6. Name and Address of Current Registered Agent GREEN, ELIZABETH A ESQ. 9155 SOUTH DADELAND BLVD SUITE 1812 MIAMI FL 33156	
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4. FEI Number 65-0565633	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	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 Signature, typed or printed name of registered agent and title if applicable.	DATE
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9. Capital Contributions as Shown on record. \$1,772,695.00	10. Amount of Capital Contributions in FLORIDA to date. \$1,772,695.00	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT # M33260	NAME DESIGN CORPORATION OF AMERICA, II	STREET ADDRESS	
STREET ADDRESS 9155 SOUTH DADELAND BLVD., #1812		CITY - ST - ZIP	
CITY - ST - ZIP MIAMI FL 33156			
DOCUMENT # P95000020988	NAME GREEN VISTA APARTMENTS, INC.	STREET ADDRESS	U00000145778
STREET ADDRESS 490 OPA-LOCKA BLVD., #20		CITY - ST - ZIP	05/03/04-80039-009 526.25
CITY - ST - ZIP OPA LOCKA FL 33054			
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY - ST - ZIP	
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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.

DESIGN CORPORATION OF AMERICA, II, a Fla. Corp., General Partner

SIGNATURE: By: *Elizabeth A. Green* **4/19/04 (305) 670-1000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #