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

SIGNATURE: BY

## Apr 15, 2004 08:00 AM Secretary of State DOCUMENT # A95000001301 GLENRIDGE HOLDINGS, LTD. Principal Place of Business Mailing Address 3400 NE 34TH ST, SUITE 101 FT LAUDERDALE FL 33308 3400 NE 34TH ST, SUITE 101 FT LAUDERDALE FL 33308 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc Suite, Apt. #, etc MOORE CR2E003 (11/03) 4. FEI Number Applied For City & State City & State 65-0661335 Not Applicable Country \$8.75 Additional Zφ Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RICHTER, SAM 3400 NE 34TH ST, SUITE 101 FT LAUDERDALE FL 33308 Street Address (P.O. Box Number is Not Acceptable) 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 registerod agent and title if applicables CATE 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 10. Amount of Capital Contributions 9. Capital Contributions \$3,000,000,00 in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record. 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. ADDRESS CHANGES ONLY 12. GENERAL PARTNER INFORMATION BOCHMENT # P95000043053 STREET ADDRESS NAME HARROW HOLDINGS, INC. STREET ADDRESS 3400 NE 34TH ST, SUITE 101 U00000120240 04/20/04-90009-010-535.00 CITY-ST-ZIP CITY-SY-ZIP FT LAUDERDALE FL 33308 DOCUMENT # STREET ADDRESS MAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS HAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OCCUMENT # STREET ADDRESS NAME STREET ADDRESS C817-S1-282 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS GITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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 thin leport as required by Chapter 620, Florida Statutes HARROW HARROW THE POW

NTED MAME OF SIGNING GENERAL PARTNER

**FILED** 

3/10/04 (954) 568-4118 Date Cayterne Proces