

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

FILED

2004 APR 22 PM 3:49

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



DOCUMENT # A95000001685  
 1. Entity Name  
 THE PALMS 2100 OCEAN BOULEVARD, LTD.

Principal Place of Business  
 2200 N. ATLANTIC BLVD.  
 FT. LAUDERDALE, FL 33305

Mailing Address  
 2200 N. ATLANTIC BLVD.  
 FT. LAUDERDALE, FL 33305



2. Principal Place of Business  
 3800 S. Ocean Dr

3. Mailing Address  
 3800 S. Ocean Dr

Suite, Apt. #, etc.  
 210

City & State  
 Hollywood, FL

Zip  
 33019

02032004 Chg-LP CR2E003 (10/03)

6. Name and Address of Current Registered Agent  
 FAIRMAN, NEIL  
 2100 N. ATLANTIC BLVD.  
 FT. LAUDERDALE, FL 33305

4. FEI Number  
 65-0625015

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)  
 3800 S. Ocean Drive  
 Suite 210  
 City Hollywood FL Zip Code 33019

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$0.00

10. Amount of Capital Contributions in FLORIDA to date.

**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 #	K74912	STREET ADDRESS	3800 S. Ocean Drive #210
NAME	PLAZA PROPERTIES GROUP, INC.	CITY-ST-ZIP	Hollywood, FL 33019
STREET ADDRESS	2200 N. ATLANTIC BLVD.		
CITY-ST-ZIP	FT. LAUDERDALE, FL 33305		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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: Neil, Fairman 4/14/2004 954-630-9890  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #