



2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JAN 26 AM 10:36

DOCUMENT # A95000002037 1. Entity Name ROMAR GROUP, LTD.					
Principal Place of Business %DANIEL A BARR, EA, 8220 STATE ROAD 84, #200 DAVIE, FL 33324			Mailing Address %DANIEL A BARR, EA, 8220 STATE ROAD 84, #200 DAVIE, FL 33324		
2. Principal Place of Business Suite, Apt., etc. 7320 GRIFFIN ROAD SUITE 203		3. Mailing Address Suite, Apt., etc. 7320 GRIFFIN ROAD SUITE 203			
City & State DAVIE, FL 33314		City & State DAVIE, FL 33314		4. FEI Number 65-0628997	
Zip 		Country 		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DANIELS, NICHOLAS M THERREL BAISDEN MEYER & WEISS ONE SE THIRD AVE #2400 MIAMI, FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$11,735,138.00			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 # NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
P95000096874 MURO, INC. 8220 STATE ROAD 84, SUITE 200 DAVIE, FL 33324			7320 GRIFFIN ROAD SUITE 203 DAVIE, FL 33314		
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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.					
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE: <i>X. D. Steele</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> </div> <div style="width: 40%; text-align: center;"> AS PRESIDENT OF CORPORATE GENERAL PARTNER <small>Date</small> </div> <div style="width: 20%; text-align: right;"> <small>Daytime Phone #</small> </div> </div>					

STAPLE CHECK HERE