



**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Mar 08, 2005 08:00 AM**  
**Secretary of State**

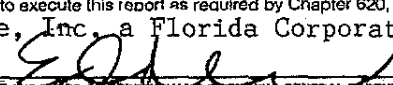
<b>DOCUMENT # A95000002103</b> 1. Entity Name <b>DEL ROSAL INVESTMENT PARTNERS, LTD.</b>					
Principal Place of Business <b>9400 OLD CUTLER LANE          CORAL GABLES, FL 33156</b>			Mailing Address <b>34TH FLOOR - MIAMI CENTER          201 SOUTH BISCAYNE BLVD.          MIAMI, FL 33131</b>		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		  01122005    Chg-LP    CR2E003 (10/03)	
City & State		City & State			
Zip                      Country		Zip                      Country			
4. FEI Number <b>65-0682045</b>		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				6. Name and Address of Current Registered Agent  <b>FERRELL GROUP CORPORATE SERVICES, LLC          201 SOUTH BISCAYNE BLVD., SUITE 3400          MIAMI, FL 33131</b>	
7. Name and Address of New Registered Agent Name					
Street Address (P.O. Box Number is Not Acceptable)					
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. <b>\$775,000.00</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> <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 #	P95000096763		STREET ADDRESS		
NAME	BIONNE, INC.		CITY-ST-ZIP		
STREET ADDRESS	201 SOUTH BISCAYNE BLVD., SUITE 3400		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		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.  

Bionne, Inc. a Florida Corporation as General Partner

**SIGNATURE:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  
**Elena del Rosal Wilson Director**

**2/17/05**  
Date

**305 661 8286**  
Daytime Phone #