2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

MAX D. Puranic

FILED Apr 30, 2005 08:00 AM Secretary of State

1. Entity Nami	MENT # A960000 LAZA, LTD.	00079		Secretary of Stat
Principal Place	of Business	Mailing Address		
30 WEST MASHTA DR 30 WEST MASHTA DRI			DRIVE	
SUITE 400	E, FL 3314 <u>9</u>	SUITE 400 KEY BISCAYNE, FL	73140	
KET DISMITTE	L, I L 30170	NET OLOGITIME, TE		
2. Principal Pl	ace of Business	3. Mailing Address	_	TARKAN ININ ININ BANI BANI BANI BANI BANI BA
Suite, Apt. #, etc.		Suite, Apt #, etc.		04132005 Chg-LP CR2E003 (10/03)
City & State		City & State		4. FEI Number Applied For 65-0638098 Not Applied
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Curr	ent Registered Agent		7. Name and Address of New Registered Agent
DUNANIC	MAYD	* :	Name	
PUYANIC, MAX D 30 WEST MASHTA DRIVE SUITE 400 KEY BISCAYNE, FL 33149			Street Ad	Idress (P.O. Box Number is Not Acceptable)
		· ·		
	-,		City	FL Zip Code
	named entity submits this statemore ons of registered agent.	nt for the purpose of changing	ng its registered office or	registered agent, or both, in the State of Florida. I am familiar with, and according
SIGNATURE -	Signature, typed or printed name of registered a	gent and lifte II applicable		DATE
9. Capital Cor as Shown o	ntributions = \$1,553,000.00	10. Amount of C in FLORIDA	Capital Contributions to date	
				REGISTERED AND ACTIVE WITH THIS OFFICE.
12.		MAY NOT be changed NER INFORMATION	on the form; an amer	ndment must be filed to change a general partner. AODRESS CHANGES ONLY
DOCUMENT#	P96000002396			ADDITES CHANGES CALL
NAME	VENICE PLAZA, INC.		STREET ADDRESS	
STREET ADDRESS CITY+ST-ZIP	30 WEST MASHTA DRIVE, # KEY BISCAYNE, FL 33149	400	CiTY-ST-ZiP	•
DOCUMENT #		t _{ee} .	STREET ADDRESS	,
NAME	~		Spari Address	U00000347745
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	<u> </u>
DOCUMENT #			STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			CUTY-ST-ZIP	
DOCUMENT # NAME			STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		·	CITY-ST-ZIP	
DOGUMENT #			STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	
DOCUMENT # NAME		*	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	·		CITY+ST-ZIP	
				ed in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio