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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000000444			
1. Entity Name CAMARGO LIMITED PARTNERSHIP			
Principal Place of Business ONE NORTH CLEMATIS STREET, 2ND FLOOR WEST PALM BEACH, FL 33401		Mailing Address P.O. BOX 3435 WEST PALM BEACH, FL 33402	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0804901		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
KLOCK, JOSEPH P JR. 200 SOUTH BISCAYNE BLVD., SUITE 4000 MIAMI, FL 33131-2398		Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____			
9. Capital Contributions as Shown on record. \$2,000.00		10. Amount of Capital Contributions in FLORIDA to date.	
11. MAKE CHECK PAYABLE TO: SECRETARY OF STATE SEE REVERSE SIDE FOR FEE INFORMATION			
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	P96000020606 CAMARGO MANAGEMENT COMPANY ONE NORTH CLEMATIS STREET, 2ND FLOOR WEST PALM BEACH, FL 33401	STREET ADDRESS	
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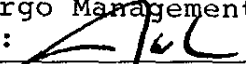


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CR2E003 (10/02)

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.

Camargo Management Company, GP

SIGNATURE: By:  **04.25.03** **35577-2877**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER