


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

FILED
Jul 23, 2004 08:00 AM
Secretary of State

DOCUMENT # A96000000942		
1. Entity Name SIRKUS FAMILY LIMITED PARTNERSHIP #1, LTD.		

Principal Place of Business 3303 ARUBA WAY, APT. 0-4 COCONUT CREEK, FL 33066	Mailing Address 3303 ARUBA WAY, APT. 0-4 COCONUT CREEK, FL 33066
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. # etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



07122004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0667859	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LABINER, PAUL S 2255 GLADES RD., STE. 422A BOCA RATON, FL 33431
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7. Name and Address of New Registered Agent	
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 _____
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9. Capital Contributions as Shown on record. \$1,200,000.00	10. Amount of Capital Contributions in FL ORIDA to date.	In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.
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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 #		STREET ADDRESS	
NAME	SIRKUS, SELMA L	CITY - ST - ZIP	
STREET ADDRESS	3303 ARUBA WAY, APT. 0-4		
CITY - ST - ZIP	COCONUT CREEK, FL 33066		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
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CITY - ST - ZIP			

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07/23/04-80008-003 526.25

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)(f), 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: <u>SERMA SIRKUS</u>	7/14/04 9/4 11 30 07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date