## 2004 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2004**

SECRETARY OF STATE
DIVISION OF CORPORATIONS DOCUMENT # A96000000955 04 FEB -9 PM 1:51 OAKS MALL LIMITED Principal Place of Business Mailing Address 2201 NW 30TH PLACE, STE A 2201 NW 30TH PLACE, STE A POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01232004 CR2E003 (10/03) Chg-LP Applied For City & State 4. FEI Number City & State 65-0664839 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name 0 VALDES-FAULI CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 777 SOUTH FLAGLER DRIVE, SUITE 500 EAST WEST PALM BEACH, FL 33401 Zip Code FL 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 -Signature, typed or printed name of registered agent and title if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions as Shown on record. \$3,100,000.00 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 ADDRESS CHANGES ONLY 13. DOCUMENT # P95000041343 STREET ADDRESS 2201 NW 30th Place, Suite A NAME ELLIV PROPERTY INVESTMENT, INC. STREET ADDRESS 8556 PALM PARKWAY CITY-ST-ZIP Pompano Beach, FL 33069 CITY-ST-ZIP ORLANDO FL 32836 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME. STREET ADJURESS CITY-ST-ZIP CITY-ST-ZIF 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

> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Elliv Property Investment, Inc., General Partner,

anaus

SIGNATURE: .