

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

**DOCUMENT # A96000001209**

1. Entity Name  
**GNA REAL PROPERTIES, LTD.**



FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

04 FEB 27 AM 9:25

Principal Place of Business  
 175 N.W. 139 STREET  
 MIAMI, FL 33168

Mailing Address  
 175 N.W. 139 STREET  
 MIAMI, FL 33168

2. Principal Place of Business 3. Mailing Address



Suite, Apt. #, etc. Suite, Apt. #, etc.

02102004 Chg-LP CR2E003 (10/03)

City & State City & State

4. FEI Number  
 65-0764709

Applied For  
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EVANS, DONALD G  
 1004 N.E. 115 STREET  
 MIAMI, FL 33161

Name  
 DONALD G. EVANS, JR.  
 Street Address (P.O. Box Number is Not Acceptable)  
 1004 N.E. 115 STREET  
 City  
 BISCAYNE PARK FL Zip Code  
 33161

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 *Donald G. Evans*

2/24/04  
 DATE

9. Capital Contributions  
 as Shown on record. \$138,000.00

10. Amount of Capital Contributions  
 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

DOCUMENT # P96000026127  
 NAME GNA PROPERTY MANAGEMENT, INC.  
 STREET ADDRESS 175 N.W. 139 STREET  
 CITY-ST-ZIP MIAMI, FL 33168

13. ADDRESS CHANGES ONLY

STREET ADDRESS  
 CITY-ST-ZIP  
 STREET ADDRESS  
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 500030234005  
 03/10/04--01049--023 \*\*526.25

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STREET ADDRESS  
 CITY-ST-ZIP

PLEASE CHECK HERE

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: *Donald G. Evans* DONALD G. EVANS 2/24/04 3056880082  
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #