


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

2005 JUL -7 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A96000001573		
1. Entity Name CORAL WEST PLAZA III, LTD.		

Principal Place of Business C/O CORAL WEST PLAZA III, INC. 2460 S.W. 137TH AVENUE, SUITE 238 MIAMI, FL 33175	Mailing Address C/O CORAL WEST PLAZA III, INC. 2460 S.W. 137TH AVENUE, SUITE 238 MIAMI, FL 33175
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent A&A REGISTERED AGENT, INC. 2450 S.W. 137TH AVENUE, SUITE 238 MIAMI, FL 33175		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4551 Ponce de Leon Blvd. City Coral Gables FL Zip Code 33146	
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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 <u>Gretel Rodriguez, President</u> DATE <u>4/1/05</u>	
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9. Capital Contributions as Shown on record. \$9,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 # NAME STREET ADDRESS CITY-ST-ZIP	P96000070209 CORAL WEST PLAZA III, INC. 2460 S.W. 137TH AVENUE, SUITE 238 MIAMI, FL 33175	STREET ADDRESS	
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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: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/28/05
Date

Daytime Phone #

STAPLE CHECK HERE