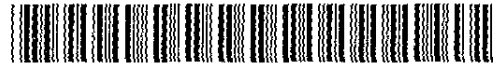


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # A96000002226 1. Entity Name TAVAH REALTY ADA COMPLIANT LTD.					
Principal Place of Business 4444 STE. CATHERINE WEST, STE. 100 WESTMOUNT, QUEBEC, CANADA H3Z 1R2,			Mailing Address 4444 STE CATHERINE WEST, SUITE 100 WESTMOUNT, QUEBEC H3Z 1R2 CANADA,		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite Apt #, etc.			
City & State		City & State		4. FEI Number 98-0165499	
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	
COBB, THOMAS C ESQ. %COBB & EBIN P.A. 825 BRICKELL BAY DR, STE 1648 MIAMI, FL 33131-2920				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 _____ Signature, typed or printed name of registered agent and file if applicable.					
9. Capital Contributions as Shown on record. \$2,111,371.00			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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	F96000006321		STREET ADDRESS		
NAME	DALFEN SARNO ENTERPRISES INC.		CITY - ST - ZIP		
STREET ADDRESS	4444 STE CATHERINE WEST SUITE 100				
CITY - ST - ZIP	WESTMOUNT QUEBEC CANADA,				
DOCUMENT #			STREET ADDRESS		
NAME			CITY - ST - ZIP		
STREET ADDRESS					
CITY - ST - ZIP					
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NAME			CITY - ST - ZIP		
STREET ADDRESS					
CITY - ST - ZIP					
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>Murray Dalfen</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date: <u>Apr 11, 2005</u> 514-938-1050 Daytime Phone #		



03032005 Chg-LP CR2E003 (10/03)

4. FEI Number 98-0165499 Applied For Not Applicable

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

COBB, THOMAS C ESQ.
 %COBB & EBIN P.A.
 825 BRICKELL BAY DR, STE 1648
 MIAMI, FL 33131-2920

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable.

9. Capital Contributions as Shown on record. **\$2,111,371.00**

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

13. ADDRESS CHANGES ONLY

DOCUMENT # F96000006321
 NAME DALFEN SARNO ENTERPRISES INC.
 STREET ADDRESS 4444 STE CATHERINE WEST SUITE 100
 CITY - ST - ZIP WESTMOUNT QUEBEC CANADA,
 DOCUMENT #
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 04/27/05-80113-001 535.00

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: Murray Dalfen Date: Apr 11, 2005 514-938-1050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

STAPLE CHECK HERE