


2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # A96000002395					
1. Entity Name BUSCEMI FAMILY LIMITED PARTNERSHIP					
Principal Place of Business 11314 WESTLAND CIRCLE BOYNTON BEACH FL 33437			Mailing Address 11314 WESTLAND CIRCLE BOYNTON BEACH FL 33437		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt #, etc.		Suite, Apt #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0553990	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BUSCEMI, IRNA 11314 WESTLAND CIRCLE BOYNTON BEACH FL 33437			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record.		\$555,300.00		10. Amount of Capital Contributions in FLORIDA to date.	
11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION					
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 #	P01000079318		STREET ADDRESS		
NAME	BUSCEMI HOLDINGS, INC.		CITY - ST - ZIP		
STREET ADDRESS	11314 WESTLAND CIRCLE				
CITY - ST - ZIP	BOYNTON BEACH FL 33437				
DOCUMENT #			STREET ADDRESS	U000000140176	
NAME			CITY - ST - ZIP	04/23/04-80149-017 526.25	
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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: <u>BUSCEMI HOLDINGS, INC.</u> <u>IRNA BUSCEMI</u> <u>4/19/04</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER					



MOORE CR2E003 (11/03)

STAPLE CHECK HERE