


**2005 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2005**

**FILED  
Apr 18, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # A9600002522**

1. Entity Name  
P.L.R. FAMILY LIMITED PARTNERSHIP, LTD.



Principal Place of Business  
3510 CORAL WAY, SUITE 200  
MIAMI, FL 33145

Mailing Address  
3510 CORAL WAY, SUITE 200  
MIAMI, FL 33145

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country



03072005 Chg-LP CR2E003 (10/03)

4. FEI Number  
65-0756862

Applied For  
Not Applicable

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

5. Name and Address of Current Registered Agent

RESTREPO, DARIO  
3510 CORAL WAY, SUITE 200  
MIAMI, FL 33145

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$1,104,000.00

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	RESTREPO, PEDRO LUIS	STREET ADDRESS	
NAME	3510 CORAL WAY, SUITE 200	CITY-ST-ZIP	
STREET ADDRESS	MIAMI, FL 33145		
CITY-ST-ZIP			
DOCUMENT #	RESTREPO, MARIA STELLA	STREET ADDRESS	U00000314574
NAME	3510 CORAL WAY, SUITE 200	CITY-ST-ZIP	04/18/05-80171-022 526.25
STREET ADDRESS	MIAMI, FL 33145		
CITY-ST-ZIP			
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STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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:  Pedro Luis Restrepo 4/8/05 (305) 445-9555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #