

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

DOCUMENT # A97000000325

1. Entity Name
FEISS FAMILY LIMITED PARTNERSHIP



FILED

04 JUN 24 AM 9:29

STATE OF FLORIDA
TALLAHASSEE

MJM

Principal Place of Business
**4875 NORTH FEDERAL HIGHWAY, SEVENTH FLOOR
FT LAUDERDALE, FL 33308**

Mailing Address
**ATTN: ARTHUR ROSENBERG
4875 NORTH FEDERAL HIGHWAY, SEVENTH FLOOR
FORT LAUDERDALE, FL 33308**



03142003 Chg-LP CR2E003 (10/03)

4/24

| | | | |
|---|---------|--|---------|
| 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 65-0723894 | | Applied for <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |

| | | | |
|---|--|--|--|
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| ROSENBERG, ARTHUR R 4875 NORTH FEDERAL HIGHWAY, SEVENTH FLOOR FORT LAUDERDALE, FL 33308 | | 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. \$1,000,000.00 | 10. Amount of Capital Contributions in FLORIDA to date. | In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice. |
|--|---|--|

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 # | P97000008824 | STREET ADDRESS | |
| NAME | AQUAVISTA OF FORT LAUDERDALE, INC. | CITY-ST-ZIP | |
| STREET ADDRESS | 4875 NORTH FEDERAL HIGHWAY, SEVENTH FLOOR | | |
| CITY-ST-ZIP | FORT LAUDERDALE, FL 33308 | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
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| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |

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07/06/04-01629-015 **326.25

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

Shelton 954 494 1226

STAPLE CHECK HERE