2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

DOCUMENT # A97000001361 2005 APR -8 PM 2: 23 MAN INVESTMENTS, LTD. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 12445 KEYSTONE ISLAND DRIVE C/O MAN INVESTMENTS, LTD. 12445 KEYSTONE ISLAND DRIVE NORTH MIAMI, FL 33181 NORTH MIAMI, FL 33181 2. Principal Place of Business Mailing Address 2631 DERLAGO DR 2531 NEL LAGO Suite, Apt. #, etc Suite. Apt. #. etc Chg-LP 01042005 CR2E003 (10/03) Applied For 4. FEI Number 65-0769364 Not Applicable \$8.75 Additional 5. Certificate of Status Desired ... Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NUNEZ, MIKE 12445 KEYSTONE ISLAND DRIVE NORTH MIAMI, FL 33181 QUDGROALG 8. The above named enjity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am the obligations stered agen **SIGNATURE** ed or printed name of ingustored agent and title if applicable 10. Amount of Capital Contributions 9. Capital Contributions \$3,000,000,00 as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. 13. DOCUMENT # P97000039772 STREET ADDRESS <u>2531 DEL LAGO</u> DE TEQUESTA INVESTMENTS, INC. STREET ADDRESS 12445 KEYSTONE ISLAND DRIVE CITY-ST-7IP LAUDERDALG FI CITY-ST-ZIP NORTH MIAMI, FL 33181 DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **700054029807** 05/06/05--01107--024 **526.25 DOCUMENT # STREET ADDRESS NAME STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT / STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 14. A 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 1/24/05 305 788-2508 SIGNATURE: . SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FILED