
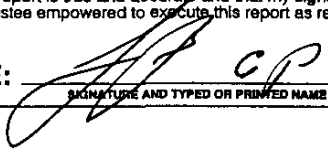


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

05 FEB 24 AM 10:32

DOCUMENT # A97000001692				
1. Entity Name MARINA BAY CLUB LIMITED PARTNERSHIP				
Principal Place of Business 1986 N.E. 149TH STREET NORTH MIAMI, FL 33181		Mailing Address 1986 N.E. 149TH STREET NORTH MIAMI, FL 33181		
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 65-0772565
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent		
BARTHE, FREDERIC M ESQ. 888 S.E. 3RD AVENUE, STE. 400 FT. LAUDERDALE, FL 33316		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. \$10,000.00		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 #	P97000066900	STREET ADDRESS		
NAME	MARINA BAY CLUB, INC.	CITY-ST-ZIP		
STREET ADDRESS	1986 N.E. 149THE STREET			
CITY-ST-ZIP	NORTH MIAMI, FL 33181			
DOCUMENT #		STREET ADDRESS		
NAME		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)(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: 		Date	Daytime Phone #	
			2/22/05 305-940-0106	

STAPLE CHECK HERE

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