## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

ં છે

JIGNATURE:

## FILED DOCUMENT # A97000002220 04 MAY 17 PM 1:32 1. Entity Name ZENITH REALTY INVESTMENTS I, LTD. SLOW IA NOW STATE TALLAHASSLE FLORIQA Mailing Address Principal Place of Business 1500 W. CYPRESS CREEK ROAD, STE. 407 FT. LAUDERDALE, FL 33309 1000 E. HILLSBORO BLVD., SUITE 100 DEERFIELD BEACH, FL 33441 2. Principal Place of Business 3. Mailing Address **Brenner Real Estate Group** \* NOTE NEW ADDRESS\* CR2E003 (10/03) 02232004 Chg-LP 1500 W Cypress Creek Rd., Ste. 409 1500 W Cypress Creek Rd., Ste. 409 -Ft. Lauderdale, FL 33309 Ft Lauderdale, FL 33309 4. EEI Number 65-0790757 Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7, Name and Address of New Registered Agent. 6. Name and Address of Current Registered Agent Name BRENNER, SCOTT \* NOTE NEW ADDRESS\* ·1000·E: HILESBORO BLVD SUITE 100 1500 W Cypress Creek Rd., Ste. 409 ceptable) DEERFIELD BEACH, FL 33441 Ft. Lauderdale, FL-33309 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 Signature, typed or printed name of registered agent and title if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$5,668,721.00 as Shown on record. 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 ADDRESS CHANGES ONLY P97000088596 \* NOTE NEW ADDRESS\* DOCUMENT # STREET ADDRESS 1500 W Cypress Creek Rd., Ste. 409 BRENNER EQUITY ADVISORS, INC. NAME Ft. Lauderdale, FL 33309 STREET ADDRESS 1500 W. CYPRESS CREEK ROAD, STE. 407 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE, FL 33309 DOCUMENT # STREET ADDRESS 000037852190 06/10/04--01082--009 \*\*385.00 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # 000037852190 STREET ADDRESS NAMÉ <del>86/18/84-81882-818 \*\*[41.25</del> STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAMe. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME TREET ADDRESS CITY-ST-ZIP Y-ST-ZIP 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 of the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

Res

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER