2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

STAPLE CHECK HERE

## FILED Mar 23, 2005 08:00 AM Secretary of State

<u> </u>	Due By	May 1, 2005				
DOCUMENT # A9700002220  1. Entity Name					Secretary of State	
ZENITH REALTY INVESTMENTS I, LTD.						
Principal Place of Business Mailing Address					- · ·	
1500 W CYPRESS CREEK RD., STE. 409 C/O BRENNER REAL EST/						
FT. LAUDERDALE, FL 33309 1500 W CYPRESS CREEI FT. LAUDERDALE, FL 33					 	
2. Principal F	Place of Business	3. Mailing Address		· ····		
Suite, Apt. #, etc,		Suite, Apt. #, etc.			03142005 Chg-LP CR2E003 (10/03)	
City & Stat	te	City & State	·		4. FEI Number Applied For 65-0790757 Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Agent	
DOENNER						
BRENNER, SCOTT 1500 W CYPRESS CREEK RD., STE. 409 FT. LAUDERDALE, FL 33309				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						
s the obligat	tions of registered agent.	· ·-	···cg·otorios omico	, rogis(c)	co agent, or both, if the order of honda. Tail familia with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent	and tile if applicable.			= DATE	
9. Capital Co as Shown	on record. \$5,668,721.00	- 10. Amount of Capit in FLORIDA to d		3/0	7/00.45	
	A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS EN	TITY MUST BE	REGIS1	TERED AND ACTIVE WITH THIS OFFICE. It must be filed to change a general partner.	
12.	GENERAL PARTNER		13.		ADDRÉSS CHANGES ONLY	
DOCUMENT #	P97000088596		STREET ADDRESS	]		
NAME STREET ADDRESS	BRENNER EQUITY ADVISORS, INC.  1500 W CYPRESS CREEK RD., STE. 409			<u></u>	<u> </u>	
CITY+ST-ZIP	FT. LAUDERDALE, FL 33309	STE. 409	CITY+ST-ZIP		03/23/05-80050-023 526.25	
DOCUMENT # NAME			STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP			
DOCUMENT # NAME			STREET ADDRESS			
STREET ADDRESS GITY-ST-ZIP			CITY-ST-ZIP			
DOCUMENT #			STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP			
DOCUMENT #		<del></del>	STREET ADDRESS			
STREET ADDRESS	-		- CITY-ST-ZIP			
			<del></del>	<del> </del> -		
NAME			STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP			
Indicated	tertify that the information supplied with on this report is true and accurate and er or trustee empowered to execute this	that my signature shall have t	the same legal effe	ect as if m	ction 119.07(3)(i), Fiorida Statutes. I further certify that the information hade under oath; that I am a General Partner of the limited partnership o	