


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED

2005 APR 11 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A98000000030 1. Entity Name MR & R LIMITED PARTNERSHIP					
Principal Place of Business 8477 GLENCAIRN TERR. MIAMI LAKES, FL 33016			Mailing Address 8477 GLENCAIRN TERR. MIAMI LAKES, FL 33016		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 65-0811135 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				04062005 Chg-LP CR2E003 (10/03)	
6. Name and Address of Current Registered Agent GONZALEZ, ROLANDO 8477 GLENCAIRN TERR. MIAMI LAKES, FL 33016			7. Name and Address of New Registered Agent Name MARIA ELENA MORIYON Street Address (P.O. Box Number is Not Acceptable) 8477 GLENCAIRN TERR. City MIAMI LAKES FL Zip Code 33016		
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 <u><i>Maria Elena Moriyon</i></u> APR - 6 2005 <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$1,000,000.00		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 # NAME STREET ADDRESS CITY-ST-ZIP	GONZALEZ, ROLANDO 8477 GLENCAIRN TERR. MIAMI LAKES, FL 33016		STREET ADDRESS CITY-ST-ZIP	980054035649 05/09/05--01009--021 **526.25	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GONZALEZ, MARIA ELENA 8477 GLENCAIRN TERR. MIAMI LAKES, FL 33016		STREET ADDRESS CITY-ST-ZIP		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: <u><i>Maria Elena Moriyon</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			04-06-05 705-528-2989 <small>Date Daytime Phone #</small>		

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