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

## Apr 29, 2004 08:00 AM Secretary of State DOCUMENT # A98000000292 ADLEE DEVELOPERS, LTD. Principal Place of Business Mailing Address 1400 NW 107TH AVE. 1400 NW 107TH AVE. MIAMI, FL 33172-2704 MIAMI, FL 33172-2704 2. Principal Place of Business Mailing Address Suite Apt # etc Suite Apt # etc 03292004 Chg-LP CR2E003 (10/03) City & State Applied For 4. FEI Number City & State 59-1383928 Not Applicable Ζp Country 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 LEVY, JOEL Street Address (P.O. Box Number is Not Acceptable) 1400 NW 107TH AVE. MIAMI, FL 33172-2704 Zio 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 me obligations of registered agent SIGNATURE -CAT agree the typical is printed name of mysterem agent and block applicable. 10. Amount of Capital Contributions 9. Capital Contributions \$3,300,000.00 in FLORIDA to date 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. P97000107669 DOCUMENT# STREET ADDRESS ADLEE, INC. STREET ADDRESS 1400 NW 107TH AVE. CITY-ST-ZIP CITY-ST-ZIF MIAMI, FL 331722704 DOCUMENT # STREET ADDRESS U00000157838 <del>95/96/04-80044-020 52**6.**25</del> JUREET ACCRESS CITY-ST-ZIP CITY-ST-2P DOCEMENT # STREET ADDRESS NAME STREET ADDRESS CITY - ST - ZIP City-St-ZIP DOCUMENT # STREET ADDRESS MARKE STREET ADERESS OIY-SI-ZIP Sdy Sd Jap pro tilgelica STREET ADDRESS 1.460 THEFT APPLIES City St-7iP Mrst 56 DOCUMENT# STREET ADDRESS .AMI STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIF 14. Thereby certify that the information supplied with this filling 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 offect as if made under eath, 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.

Joel Levy

UNE AND TYPED ON SINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE:

Executive Vice President

**FILED** 

305-391-4051

Daylone Phone #