

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Mar 25, 2004 08:00 AM
Secretary of State

DOCUMENT # A98000000677

1. Entity Name
BASTANZURI FAMILY, LTD.



Principal Place of Business
10281 S.W. 20TH STREET
MIAMI, FL 33165

Mailing Address
C/O IVAN A. GOMEZ, P.A.
601 BRICKELL KEY DRIVE, #507
MIAMI, FL 33131



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02172004 Chg-LP CR2E003 (10/03)

4. FEI Number

65-0851750

Applied For
 Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

IAG CORPORATE SERVICES, INC.
601 BRICKELL KEY DRIVE, SUITE 507
MIAMI, FL 33131

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and fee if applicable

DATE

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 # **P98000021082**
 NAME **BASTANZURI CORP.**
 STREET ADDRESS **10281 S.W. 20TH STREET**
 CITY-ST-ZIP **MIAMI, FL 33165**

STREET ADDRESS

CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

REMBERTO BASTANZURI, President

Date

(305) 371-9213

Daytime Phone #

STAPLE CHECK HERE