


**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Apr 09, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # A98000001400  
 1. Entity Name  
 3475 NW 114TH AVE., LTD.



Principal Place of Business      Mailing Address  
 3475 NW 114TH AVE.      3475 NW 114TH AVE.  
 MIAMI, FL 33178      MIAMI, FL 33178



2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

03172005      Chg-LP      CR2E003 (10/03)

4. FEI Number      Applied For  
 65-0860451      Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent  
 MATOS, VICTOR  
 3475 NW 114TH AVE.  
 MIAMI, FL 33178

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and file if applicable

9. Capital Contributions as Shown on record.      \$263,802.00

10. Amount of Capital Contributions in FLORIDA to date.      119,521

DATE      12-31-04

**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 #      P98000053081  
 NAME      VEM PROPERTIES, INC.  
 STREET ADDRESS      3475 NW 114TH AVE.  
 CITY-ST-ZIP      MIAMI, FL 33178

STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

STREET ADDRESS      U00000234944  
 CITY-ST-ZIP      04/09/05-80009-006 526.25

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STREET ADDRESS  
 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: *Victor Matos*      DATE: 4/1/05      DAYTIME PHONE #: (305) 593-5664

STAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER      Date      Daytime Phone #