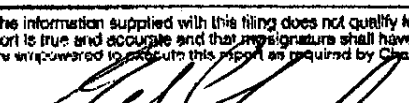


**-- 2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004**

FILED

2004 JUN 14 AM 8:09

DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

DOCUMENT # A98000002085				2004 JUN 14 AM 8:09	
1. Entity Name B.C. FUTURES, LTD.		DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA			
Principal Place of Business 5700 MEMORIAL HIGHWAY, STE. 210 TAMPA, FL 33615		Mailing Address 5700 MEMORIAL HIGHWAY, STE. 210 TAMPA, FL 33615			
2. Principal Place of Business 1703 W. STATE ST.		3. Mailing Address 1703 W. STATE ST.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		06042004 Chg-LP CR2E003 (10/03)	
City & State TAMPA, FL		City & State TAMPA, FL		4. FBI Number 50-3532711	
Zip 33606		Zip 33606		Applied For Not Applicable	
Country USA		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PELAEZ, EDWARD A JR 5700 MEMORIAL HIGHWAY, STE. 210 TAMPA, FL 33615				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable) 1703 W. STATE ST.	
City TAMPA				FL Zip Code 33606	
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 _____					
9. Capital Contributions as Shown on record \$10,000,000.00					
10. Amount of Capital Contributions in FLORIDA to date.					
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.					
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 #	P98000003475			STREET ADDRESS	1703 W. STATE ST.
NAME	WORLD CAPITAL FUTURES, INC.			CITY-ST-ZIP	TAMPA, FL 33606
STREET ADDRESS	5700 MEMORIAL HIGHWAY, STE. 210			STREET ADDRESS	
CITY-ST-ZIP	TAMPA, FL 33615			CITY-ST-ZIP	7000038162157
DOCUMENT #				SIGNATURE	06/22/04--01007--012--##526.25
NAME				CITY-ST-ZIP	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
DOCUMENT #				STREET ADDRESS	
NAME				CITY-ST-ZIP	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
DOCUMENT #				STREET ADDRESS	
NAME				CITY-ST-ZIP	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				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 limited liability partnership and am empowered to execute this report as required by Chapter 620, Florida Statutes.					
SIGNATURE: 				6-10-4	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER					