2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Mar 18, 2005 08:00 AM
Secretary of State

DOCUMENT # A98000002099

1. Entity Name
SHAPIRO FAMILY PARTNERSHIP, LTD.

Principal Place of Business	Mailing Address
2751 SOUTH OCEAN DR. APT. 801-S HOLLYWOOD, FL 33019	2751 SOUTH OCEAN DR. APT. 801-S HOLLYWOOD, FL 33019

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt #, etc
City & State	City & State
Zip / Country	Zip / Country

03062005 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0862762 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HELLER, DAN P ESQ. 701 BRICKELL AVENUE, SUITE 1900 MIAMI, FL 33131	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 title if applicable

9. Capital Contributions as Shown on record.	$1,300,000.00	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	 SHAPIRO, BETTY F TRUSTEE 2751 SOUTH OCEAN DRIVE, APT. 801-S HOLLYWOOD, FL 33019	STREET ADDRESS CITY-ST-ZIP	 U00000267629 03/18/05--01008--020 *26.25
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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)(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: Sherry A Kessel SHERRY KESSEL, GUARDIAN FOR BETTY F. SHAPIRO, TRUSTEE BETTY F SHAPIRO, IRREVOCABLE TRUST, GENERAL PARTNER 3-6-05 972-385-0004

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