

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Feb 17, 2004 08:00 AM
Secretary of State

DOCUMENT # A98000002711		
1. Entity Name JMP CITY PLACE, LTD.		

Principal Place of Business 2828 CORAL WAY PENTHOUSE SUITE MIAMI, FL 33145	Mailing Address 2828 CORAL WAY PENTHOUSE SUITE MIAMI, FL 33145
--	--

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



01192004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0893223	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	
HERNANDEZ, ANGEL A 2828 CORAL WAY PENTHOUSE SUITE MIAMI, FL 33145		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
-----------	------

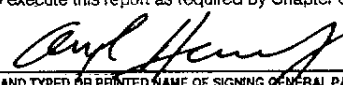
9. Capital Contributions as Shown on record. \$99.90	10. Amount of Capital Contributions in FLORIDA to date.
--	---

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 #	P98000100614	STREET ADDRESS	
NAME	JMP CITY PLACE, INC. ✓	CITY - ST - ZIP	
STREET ADDRESS	2828 CORAL WAY PENTHOUSE SUITE		
CITY - ST - ZIP	MIAMI, FL 33145		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			

00000069801
02/26/04 08814 065 150.00

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: 	ANGEL HERNANDEZ VICE-PRESIDENT	Date	Daytime Phone #
--	-----------------------------------	------	-----------------

STAPLE CHECK HERE