



**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2005**

DOCUMENT # A99000000133 1. Entity Name PEREZ LIMITED PARTNERSHIP						FILED 2005 MAY -2 P 4:19 SECRETARY OF STATE TALLAHASSEE, FLORIDA 	
Principal Place of Business 329 E. 9TH ST. HIALEAH FL 33010				Mailing Address 329 E. 9TH ST. HIALEAH FL 33010			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent BOHATCH, JOHN S ESQ. 2600 DOUGLAS ROAD, PH-8 CORAL GABLES FL 33134				7. Name and Address of New Registered Agent Name <u>Jose A Perez CPA.</u> Street Address (P.O. Box Number is Not Acceptable) <u>329 E 9th STREET SUITE 201</u> City <u>HIALEAH</u> FL Zip Code <u>33010</u>			
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 <u>[Signature]</u> DATE <u>4/28/05</u> <small>Signature, typed or printed name of registered agent and title if applicable</small>							
9. Capital Contributions as Shown on record. \$635,500.00				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 # P96000011865 NAME JAP REALTY, INC. STREET ADDRESS 329 E. 9TH STREET CITY-ST-ZIP HIALEAH FL 33010				STREET ADDRESS CITY-ST-ZIP			
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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: <u>[Signature]</u> <u>Jose A Perez</u> <u>4/27/05</u> <u>305-885-0601</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #</small>							

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