

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT # A99000000193

1. Entity Name  
GILLER ENTERPRISES, LTD.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JUN 13 AM 9:23

Principal Place of Business  
C/O THE GILLER BUILDING  
975 ARTHUR GODFREY ROAD  
MIAMI BEACH, FL 33140

Mailing Address  
C/O THE GILLER BUILDING  
975 ARTHUR GODFREY ROAD  
MIAMI BEACH, FL 33140

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02152005 Chg-LP CR2E003 (10/03)

4. FEI Number  
65-0896902

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

GILLER, NORMAN M  
975 41ST STREET, SUITE 401  
MIAMI BEACH, FL 33140

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record. \$2,542,172.00

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 # P99000007208  
NAME RELIG, INC.  
STREET ADDRESS 975 ARTHUR GODFREY ROAD  
CITY-ST-ZIP MIAMI BEACH, FL 33140

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
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CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Telephone Phone #

Pres. of Relig, Inc. 4/20/05 305 538-6324

STAPLE CHECK HERE