


**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

**FILED**  
**Apr 30, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # A99000000545**

1. Entity Name  
**GIANCO HOLDINGS, LTD.**



Principal Place of Business  
 UNIT NO. 4, COSTA CORPORATE CENTRE  
 3325 N.W. 97TH AVENUE  
 MIAMI, FL 33178

Mailing Address  
 DJ GIANCOLA EXPORTS, INC.  
 4317 E. GENESEE ST.  
 SYRACUSE, NY 13214



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

04272004 Chg-LP CR2E003 (10/03)

City & State

4. FEI Number  
**65-0907316**

Applied For  
 Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent  
**D.J. GIANCOLA EXPORTS, INC.**  
**3325 NW 97TH AVENUE**  
**MIAMI, FL 33178**

7. Name and Address of New Registered Agent

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 **\$980.00**

10. Amount of Capital Contributions in FLORIDA to date **980.00**

**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

DOCUMENT #	P99000029740
NAME	GIANCO HOLDINGS, INC.
STREET ADDRESS	3325 N.W. 97TH AVE, UNIT 4
CITY-ST-ZIP	MIAMI, FL 33178
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	UD00000158498
CITY-ST-ZIP	05/07/04-80020-016 141.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

STAPLE CHECK HERE

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 **4/27/04** Daytime Phone # **(305) 446-1002**