2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
04 APR 30 PM 12:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04262004 Chg-LP CR2E003 (10/03)

DOCUMENT # A99000001602

1. Entity Name
FLATAUR II, LTD.

Principal Place of Business	Mailing Address
1350 EAST NEWPORT CENTER DRIVE, SUITE 206 DEERFIELD BEACH, FL 33442	P.O. BOX 4219 DEERFIELD BEACH, FL 33442-4219

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

4. FEI Number: 56-0953587 ☐ 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
KAY, JAMES R ESQ. KAY LAW OFFICES 11505 FAIRCHILD GARDENS AVE., STE. 203 PALM BEACH GARDENS, FL 33410	Name: JAMES R. KAY, ESQ. Street Address (P.O. Box Number is Not Acceptable): KAY LAW OFFICES 700 VILLAGE SQUARE CROSSING, STE 102B City: PALM BEACH GARDENS, FL Zip Code: 33410

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.	$80,000.00	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 #	P97000069819	STREET ADDRESS	
NAME	TAURUS - FLORIDA OPERATIONS, INC.		
STREET ADDRESS	1350 EAST NEWPORT CENTER DRIVE, SUITE 206	CITY-ST-ZIP	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		
DOCUMENT #		STREET ADDRESS	600036266496
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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: ________ LINDA G. KASSOF 04/27/2004 (954) 428-4585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #