


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

**FILED**  
**Apr 09, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # A99000001690			
1. Entity Name BLANCK TRUST LIMITED PARTNERSHIP LLLP			
Principal Place of Business 5730 S.W. 74TH STREET, SUITE 700 MIAMI, FL 33143		Mailing Address 5730 S.W. 74TH STREET, SUITE 700 MIAMI, FL 33143	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BLANCK, ROBERT W ESQ. 5730 S.W. 74TH STREET, SUITE 700 MIAMI, FL 33143		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and date if applicable.</small>			
9. Capital Contributions as Shown on record. \$1,980,000.00		10. Amount of Capital Contributions in FLORIDA to date. <u>1,990,000.00</u>	
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P99000046786	STREET ADDRESS	
NAME	BLANCK TRUST CORPORATION	CITY-ST-ZIP	
STREET ADDRESS	5730 S.W. 74TH STREET, SUITE 700		
CITY-ST-ZIP	MIAMI, FL 33143		
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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: <u>Robert Blanck</u> ROBERT BLANCK		4/5/04 305-663-0177	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		<small>Date System Phone #</small>	



04062004 Chg-LP CR2E003 (10/03)  
 4. FEI Number 65-0991690 Applied For Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

STAPLE CHECK HERE