

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # B00000000087

1. Entity Name
DIAB LP



Principal Place of Business
**315 SEAHAWK DRIVE
 DESOTO, TX 75115**

Mailing Address
**315 SEAHAWK DRIVE
 DESOTO, TX 75115**



2. Principal Place of Business

3. Mailing Address

Suite Apt # etc.

Suite Apt # etc.

02212005 Chg-LP CR2E003 (10/03)

City & State

City & State

4. FEI Number
52-2206406

Applied For
 (Not Applicable)

Zip

Country

Zip

Country

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

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

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: **\$579,933.00**

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 #	F00000001681	STREET ADDRESS	
NAME	DIAB GENERAL INC.	CITY- ST- ZIP	
STREET ADDRESS	315 SEAHAWK DRIVE		
CITY- ST- ZIP	DESOTO, TX 75115		
DOCUMENT #		STREET ADDRESS	
NAME		CITY- ST- ZIP	
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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)(1), 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 820, Florida Statutes.

SIGNATURE: Ruby Fender **DIAB LP by** **DIAB General** **Its General Partner** **3/24/05** **972-** **228-7690**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #