2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2004

SIGNATURE: RAMESH BHATIA

DUE DY MAT 1, 2004					· -	
DOCUMENT # B0100000232 1. Entity Name					The state of the s	
BHATIA PROPERTIES, LTD.					04 APR 29 AM 10: 08	
Principal Place of Business Mailing Address					` :	
7101 ATCO FT WORTH	DRIVE TX 76118-7029	7101 ATCO DRIVE FT WORTH TX 76118-7029			SECRETARY OF STATES TALLAHASSEE, FLORIDA	
_					. A CENTRAL TOTAL BRIDE THE BRIDE BRIDE BRIDE BRIDE BRIDE BRIDE TO PER BRIDE	
2. Principal Place of Business		3. Mailing Address				
-Suite, Apt #; etc.		Suite, Apt. #, etc.			MOORE CR2E003 (11/03)	
City & State		City & State			4. FEI Number 75-2833832 Applied Not App	licable
Zip	Country	Zip	Cour	try	5. Certificate of Status Desired See Required Fee Required	ıJ
	6. Name and Address of Current I	Registered Agent			7. Name and Address of New Registered Agent	
				Name		
BHATIA, RAMESH 2407 WILLIAMETTE DRIVE PLANT CITY FL 33566				Street Address (P.O. Box Number is Not Acceptable)		
				Oit.		
				City	FL Zip Code	
	named entity submits this statement for tions of registered agent.	the purpose of changing its	register	ed office or register	red agent, or both, in the State of Florida. I am familiar with, and a	ccept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.						
Capital Co as Shown	11: MAKE CHECK PAYABLE TO FL. DEPT. OF SEE REVERSE SIDE FOR FEE INFORMATION	The state of the s				
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 # NAME	BHATIA, RAMESH			ET ADDRESS		
STREET ADDRESS				-ST-ZIP		
City-St-ZIP	FORT WORTH TX		LIET	-51-21	400035846004 	
DOCUMENT # NAME	F01000003248 BHATIA HOLDINGS INC			ET ADDRESS	U3/11/U4U1UU3UU4 **Z11.23	
STREET ADDRESS CITY-ST-ZIP	P FORT WORTH TX		CITY	-ST-ZIP		
DOCUMENT # NAME			STRE	ET ADDRESS		
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DOCUMENT # NAME			STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP		
DOCUMENT / NAME			STRI	ET ADDRESS	198	
STREET ADDRESS CTY-ST-ZIP			CITY	-ST-ZIP	- 1	
indicated	certify that the information supplied with I on this report is true and accurate and yer or trustee empowered to execute this	hat my signature shall have t	he samo	e legal effect as if n	ection 119.07(3)(i), Florida Statutes. I further certify that the informationade under oath; that I am a General Partner of the limited partner	ation rship or