


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # B01000000268					
1. Entity Name LATIN AMERICAN COMMUNICATIONS PARTNERS-A, LP					
Principal Place of Business 101 EAST KENNEDY BLVD., SUITE 3300 TAMPA, FL 33602			Mailing Address 101 EAST KENNEDY BLVD., SUITE 3300 TAMPA, FL 33602		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. # etc			Suite, Apt. # etc		
City & State			City & State		
Zip		Country		Zip	
Country		Country		04262004 Chg-LP CR2E003 (10/03)	
4. FEI Number 52-2332568				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired				<input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
JUNG, MING 101 EAST KENNEDY BLVD., SUITE 3300 TAMPA, FL 33602			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record \$75.00		10. Amount of Capital Contributions in FLORIDA to date. 75.00			
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			13. ADDRESS CHANGES ONLY		
DOCUMENT # B01000000268	NAME LATIN AMERICAN INVESTMENT PARTNERS, LP		STREET ADDRESS		
STREET ADDRESS 101 EAST KENNEDY BLVD., SUITE 3300	CITY - ST - ZIP TAMPA, FL 33602		CITY - ST - ZIP		
DOCUMENT # NAME			STREET ADDRESS	000000157220 05/06/04-80011-017 141.25	
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STREET ADDRESS CITY - ST - ZIP			CITY - ST - ZIP		
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: <i>M. G. Jung</i> Ming G. Jung			4/26/2004 (813) 226-8544		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytime Phone #</small>		

STAPLE CHECK HERE