2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

STAPLE CHECK

SIGNATURE:

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Mar 19, 2004 08:00 AM Secretary of State **DOCUMENT # B02000000130** 1. Entity Name THRÉE SEAS LIMITED PARTNERSHIP, L.P. Principal Place of Business Mailing Address P.O. BOX 4 2530 CHANNIN DRIVE WILMINGTON, DE 19810 TOMS RIVER, NJ 08754 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01222004 Chg-LP CR2E003 (10/03) 4. FEI Number City & State City & State Applied For 22-3840266 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PRATT, DAVID ESQ. Street Address (P.O. Box Number is Not Acceptable) DAVID PRATT AND ASSOCIATES, P.A. 2101 CORPORATE BLVD., #220 BOCA RATON, FL 33431 City 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 10. Amount of Capital Contributions 9. Capital Contributions \$1,985,000.00 in FLORIDA to date. \$518,913.00 as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. F02000001583 ODCUMENT # STREET ADDRESS NAME HITE THREE, INC. STREET ADDRESS P.O. BOX 4 CITY-ST-ZIP CUTY - ST- ZIP TOMS RIVER, NJ 08754 DOCUMENT # 03/26/04-80028-002 526.25 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY -ST- ZIF DOCUMENT # STREET ADDRESS NAME 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 220. Florida Statutes HITE THREE, INC.

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