

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

**FILED**  
**May 20, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # B98000000178**

1. Entity Name  
**TASMAN FINANCIAL LIMITED PARTNERSHIP**



Principal Place of Business  
**1717 N. BAYSHORE DR. #2331**  
**MIAMI, FL 33132-1160**

Mailing Address  
**1717 N. BAYSHORE DR. #2331**  
**MIAMI, FL 33132-1160**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04292004 Chg-LP CR2E003 (10/03)

City & State

City & State

4. FEI Number

Applied For

**91-1884526**

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

**CANTWELL, RONALD**  
**1717 N. BAYSHORE DR. #2331**  
**MIAMI, FL 33132-1160**

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.

**\$5,000.00**

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 # **F98000001696**  
NAME **ARJAY ENTERPRISES, INC.**  
STREET ADDRESS **1717 N. BAYSHORE DR., #2331**  
CITY-ST-ZIP **MIAMI, FL 331321160**

STREET ADDRESS

CITY-ST-ZIP

**U0000001C1641**

**05/27/04-80004-002 141.25**

DOCUMENT #  
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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: **Ronald J. Cantwell Pres. Arjay Enterprises Inc 5/12/04 (305)377-9613**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

**RONALD J. CANTWELL PRES ARJAY ENTERPRISES INC**

STAPLE CHECK HERE