


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Mar 14, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A00000000860**  
 1. Entity Name  
**PRESIDENTIAL SUITES INVESTMENTS-I, LLLP**



Principal Place of Business <b>2875 NE 191ST STREET          SUITE 400          AVENTURA, FL 33180</b>	Mailing Address <b>2875 NE 191ST STREET          SUITE 400          AVENTURA, FL 33180</b>
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**DO NOT WRITE IN THIS SPACE**



01092006 No Chg-LP CR2E003 (11/05)

4. FEI Number <b>65-1022643</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**GORDON, MARK J  
 2875 NE 191ST STREET  
 SUITE 400  
 AVENTURA, FL 33180**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2006, Fee will be \$900.00**

**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	
DOCUMENT #	P00000051415
NAME	PRESIDENTIAL SUITES INVESTMENTS-I GP, INC.
STREET ADDRESS	2875 NE 191ST STREET, SUITE 400
CITY-ST-ZIP	AVENTURA, FL 33180
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000466987  
 03/23/06-80033-009 500.00

**DO NOT WRITE IN THIS SPACE**

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**  **MARK J. GORDON** 1/26/06 305-370-7100  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Class D daytime Phone #