


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

**FILED**

06 MAY -1 PM 1:45

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

<b>DOCUMENT # A01000000120</b>	
1. Entity Name DAVID MILLARD ENTERPRISES LIMITED PARTNERSHIP	

Principal Place of Business C/O ENGLEBERG & MILGRIM, P.L. 3230 STIRLING ROAD, #1 HOLLYWOOD, FL 33021	Mailing Address C/O ENGLEBERG & MILGRIM, P.L. 3230 STIRLING ROAD, #1 HOLLYWOOD, FL 33021
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2. Principal Place of Business c/o Morris Engelberg, Esq. Suite, Apt. #, etc. 4040 Sheridan Street	3. Mailing Address c/o Morris Engelberg, Esq. Suite, Apt. #, etc. 4040 Sheridan Street
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City & State Hollywood, Florida	City & State Hollywood, Florida
Zip 33021	Country USA



03272006 Chg-LP CR2E003 (11/05)

4. FEI Number 65-1070482	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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**6. Name and Address of Current Registered Agent**

ENGELBERG, MORRIS ESQ.  
C/O ENGELBERG & MILGRIM, P.L.  
3230 STIRLING ROAD, #1  
HOLLYWOOD, FL 33021

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)  
4040 Sheridan Street

City  
Hollywood

State  
FL

Zip Code  
33021

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 Morris Engelberg, Esq.  03/27/2006  
DATE

**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 #	P01000008418
NAME	DAVID MILLARD ENTERPRISES, INC.
STREET ADDRESS	3230 STIRLING ROAD, #1
CITY-ST-ZIP	HOLLYWOOD, FL 33021

**13. ADDRESS CHANGES ONLY**

STREET ADDRESS	4040 Sheridan Street
CITY-ST-ZIP	Hollywood, Florida 33021

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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

DAVID MILLARD ENTERPRISES, INC., General Partner 03/27/2006  
SIGNATURE: By: David Ralph Millard, III David Ralph Millard, III, Pres. 713-210-4368  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE