


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 17, 2008 08:00 A
Secretary of State

DOCUMENT # A0100000558 1. Entity Name PATEL FAMILY PARTNERSHIP, LTD.	
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Principal Place of Business 3100 NORTH OCEAN BOULEVARD, APT. 2209 FORT LAUDERDALE, FL 33308-7116	Mailing Address 3100 NORTH OCEAN BOULEVARD, APT. 2209 FORT LAUDERDALE, FL 33308-7116
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DO NOT WRITE IN THIS SPACE



04122008 No Chg-LP CR2E003 (12/06)

4. FEI Number 65-1091596	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUDOLF & HOFFMAN, P.A.
615 NORTHEAST THIRD AVENUE
FORT LAUDERDALE, FL 33304

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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, 2008, 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 #	P01000017249
NAME	K & K AMPLIFIED ASSETS, INC.
STREET ADDRESS	3100 NORTH OCEAN BOULEVARD
CITY-ST-ZIP	FORT LAUDERDALE, FL 333087116
DOCUMENT #	
NAME	
STREET ADDRESS	
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05/01/08-80033-024 500.00

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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: K.R. Patel 4/15/08 954-375-1950
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #