


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 APR -1 PM 1:32

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| DOCUMENT # A0100000752 |  |
| 1. Entity Name BURD FAMILY LIMITED PARTNERSHIP NO. 2, LLLP | |

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| Principal Place of Business C/O NELSON & LEVINE, P.A. 2775 SUNNY ISLES BLVD. NORTH MIAMI BEACH, FL 33160 | Mailing Address C/O NELSON & LEVINE, P.A. 2775 SUNNY ISLES BLVD. NORTH MIAMI BEACH, FL 33160 |
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| 2. Principal Place of Business - No P.O. Box # LAW OFFICES OF NELSON & NELSON PA | 3. Mailing Address LAW OFFICES OF NELSON & NELSON, PA |
| Suite, Apt. #, etc. 2775 SUNNY ISLES BLVD., SUITE 118 | Suite, Apt. #, etc. 2775 SUNNY ISLES BLVD., SUITE 118 |

02062008 Chg-LP CR2E003 (12/06)

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| City & State NORTH MIAMI BEACH, FLORIDA | City & State NORTH MIAMI BEACH, FLORIDA |
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| 4. FEI Number 65-1109910 | Applied For Not Applicable |
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| Zip 33160 | Country USA | Zip 33160 | Country USA |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 8. Name and Address of Current Registered Agent NELSON, BARRY A ESQ. C/O NELSON & LEVINE, P.A. 2775 SUNNY ISLES BLVD., SUITE 118 NORTH MIAMI BEACH, FL 33160 | |
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| 7. Name and Address of New Registered Agent | |
| Name BARRY A. NELSON, ESQ. | |
| Street Address (P.O. Box Number is Not Acceptable) LAW OFFICES OF NELSON & NELSON, PA | |
| 2775 SUNNY ISLES BLVD., SUITE 118 | |
| City NORTH MIAMI BEACH | FL Zip Code 33160 |

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.

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|--|------------------------|------------|
| SIGNATURE _____ | REGISTERED AGENT _____ | DATE _____ |
| <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | |

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 | | 13. ADDRESS CHANGES ONLY | |
|---|--|-----------------------------------|--|
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | P01000036183 CB FAMILY HOLDINGS, INC. 2775 SUNNY ISLES BLVD., SUITE 118 NORTH MIAMI BEACH, FL 33160 | STREET ADDRESS CITY - ST - ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS CITY - ST - ZIP | 400121644204 03/31/08--01008--010 **500.00 |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS CITY - ST - ZIP | |
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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

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|---|------------------|------------------------|---------------------------------|
| SIGNATURE: <i>Laurena Burdino</i> | PRESIDENT | Date March 16, 2008 | Daytime Phone # 312-649-9790 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> | | | |