


**2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008**

**FILED
Mar 06, 2008 08:00 A
Secretary of State**

DOCUMENT # A0100000926		
1. Entity Name SHACHNOW INVESTMENTS LIMITED PARTNERSHIP		
Principal Place of Business C/O ENGELBERG & MILGRIM, P.A. 4040 SHERIDAN STREET HOLLYWOOD, FL 33021	Mailing Address C/O ENGELBERG & MILGRIM, P.A. 4040 SHERIDAN STREET HOLLYWOOD, FL 33021	



01222008 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1120786	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

ENGELBERG, MORRIS ESQ.
C/O ENGELBERG & MILGRIM, P.A.
4040 SHERIDAN STREET
HOLLYWOOD, FL 33021

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, 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 # NAME STREET ADDRESS CITY-ST-ZIP	P01000068194 SHACHNOW ENTERPRISES, INC. 4040 SHERIDAN STREET HOLLYWOOD, FL 33021
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03/21/08-80045-023-500.00

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, or the receiver or trustee empowered to execute this report as receiver or trustee, shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership as required by Chapter 620, Florida Statutes.

SIGNATURE: *Luca Volary* Date: 3-3-08 Daytime Phone #: 201-871-8694
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER