## 2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2007

STAPLE CHECK HERE

SIGNATURE:

	DUEDIN	1AT 1, 2007	•	٠		en ed
DOCUMENT # A02000000670 *  1. Entity Name					Apr 252	FNLED 2007 08:00 AN etary of State
THE WEXLER INVESTMENTS LIMITED PARTNERSHIP						etary or State
Principal Place of Business Mailing Address						
7522 ISLA VERDE WAY DELRAY BEACH FL 33446 7522 ISLA VERDE WAY DELRAY BEACH FL 334						
Principal Place of Businoss - No P O. Box #     3. Mailing Address						
Suite, Apt. #, etc. Suite, Ap		Suite, Apt. #, otc.	vpl. #. olc.		1st MOORE CF	R2E003 (10/06)
City & State		City & Stato		4. FEI Numbor 01-0692393	Applied For Not Applicable	
Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Reg	stered Agent
				Namo		
WACHS, JEFFREY S ESQ. 1177 S.E. 3RD AVENUE FT. LAUDERDALE FL 33316				Street Address (P.O. Box Number is Not Acceptable)		
				City FL Zip Code		
	named entity submits this statement obligations of registered agent.	for the purpose of changing	its rogiste	cred office or regis	stered agent, or both, in the State of Flor	rida. I am familiar with, and
SIGNATURE	Signature, typed or printed name of registured again	and itle ii applicable.			DATE	
FILE NO	)W!!! Fee is \$500. *** Afte	r May 1, 2007, fee w	ill be \$	900. *** Ma	ke check payable to Florida	Department of State.
					TERED AND ACTIVE WITH THIS	
12.	GENERAL PARTNE		ne torm	i; an amendme	nt must be filed to change a gene ADDRESS CHANG	· · · · · · · · · · · · · · · · · · ·
DOCUMENT #				ET ADDRESS		
NAMI CIDET ADDRESS	WEXLER, GREGG R		3)11(			
STREET ADORESS CITY-SE-ZIP	7522 ISLA VERDE WAY DELRAY BEACH FL 33446		CITY	-S1-742°		
DOCUMENT # NAME	WEXLER, LINDA S		SIRE	ET ADDIV SS		
STREET ADDRESS CITY+ST-7/P			CITY	-SI-ZIP	U000007 05/08/07-9	730857 30096-010_500_00
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STREET ADDRESS CITY ST-ZIP			CHY	- S1 - 71P		
14. I hereby e indicated or the rec	certify that the information supplied will on this report is true and accurate an olver or trustee empowered to execute	th this filing does not qualify d that my signature shall have this report as required by Ch	for the ex the sam apter 62	cemptions containd te legal offect as if 0, Florida Statutes	ed in Chapter 119, Florida Statutes. I fu made under eath; that I am a General P	rther certify that the information Partner of the limited partnership

3/21/07 561-445-1054