2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 26, 2006 08:00 AM
Secretary of State

DOCUMENT # A03000000993

1. Entity Name
ALAM FAMILY LLLP

Principal Place of Business
15020 SOUTHWEST 74TH AVENUE
MIAMI, FL 33158-2123

Mailing Address
15020 SOUTHWEST 74TH AVENUE
MIAMI, FL 33158-2123

01122006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0083601

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ALAM, NASIR M
15020 SOUTHWEST 74TH AVENUE
MIAMI, FL 33158-2123

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 _____ 1/14/06
Signature, typed or printed name of registered agent and title if applicable — 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 #	L03000025110
NAME	ALAM MANAGEMENT, LLC
STREET ADDRESS	15020 SOUTHWEST 74TH AVENUE
CITY-ST-ZIP	MIAMI, FL 331582123
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02/02/06-80069-020 500.00

DO NOT WRITE IN THIS SPACE

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: _____ 1/14/06 (305) 669-2700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #