2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DO NOT WRITE IN THIS SPACE

FILED Mar 26, 2007 08:00 AM Secretary of State

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1. Entity Name
TAURUS PORTFOLIO INVESTMENT, LTD.



Principal Place of Business

Mailing Address

1350 EAST NEWPORT CENTER DRIVE, SUITE 206 DEERFIELD BEACH, FL 33442 1350 East Newport Center Drive, Suite 206 Deerfield Beach, FL 33442



01042007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 20-2050073

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KAY LAW OFFICES C/O JAMES R. KAY, ESQ. 700 VILLAGE SQUARE CROSSING, SUITE 102B PALM BEACH GARDENS, FL 33410

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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 Signifying, twood or criminal name of registered agent and title if acceptable						
	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, 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					

P96000081676 DOCUMENT # TAURUS REALTY CORPORATION NAME STREET ADDRESS 1350 EAST NEWPORT CENTER DRIVE, SUITE 206 CITY-ST-ZIP DEERFIELD BEACH, FL 33442 DOCUMENT # NAME STREET ADDRESS СПY-S1-2IP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-7IP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #

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14. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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:

NAME STREET ADDRESS

LING CA KUM OF

3.73.07

054 428-4585

Daytime Phone