


**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**May 07, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A0400000976**

1. Entity Name  
**PRESIDENTIAL SUITES INVESTMENTS III, LLLP**



Principal Place of Business  
**2875 N.E. 191ST ST, STE 400**  
**AVENTURA, FL 33180**

Mailing Address  
**2875 N.E. 191ST ST, STE 400**  
**AVENTURA, FL 33180**

**DO NOT WRITE IN THIS SPACE**



01182007 No Chg-LP CR2E003 (12/06)

4. FEI Number  
**20-1272133**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**PAPADAKIS, JOAN**  
**2875 NE 191ST STREET**  
**SUITE 400**  
**AVENTURA, FL 33180**

**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, 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

DOCUMENT #	P04000092270
NAME	PRESIDENTIAL SUITES INVESTMENTS III GP INC
STREET ADDRESS	2875 N.E. 191ST ST, STE 400
CITY-ST-ZIP	AVENTURA, FL 33180
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000762450  
 05/29/07-00008-019 500.00

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

STAPLE CHECK HERE

SIGNATURE: Joan Papadakis Date: 4/9/07 Daytime Phone #: 305 370-7100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**DO NOT WRITE IN THIS SPACE**