


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

**FILED**  
**Mar 17, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # A06000000797	
1. Entity Name MARASOF LIMITED PARTNERSHIP	

Principal Place of Business 1930 HARRISON STREET SUITE 502 HOLLYWOOD, FL 33020 US	Mailing Address 1930 HARRISON STREET SUITE 502 HOLLYWOOD, FL 33020 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

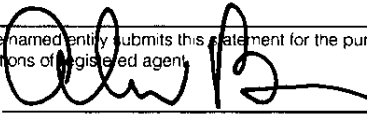


01292007 Chg-LP CR2E003 (12/06)

4. FEI Number 20-5270406	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ROZENCWAIG, NADEL & FERRERO-CARR, LLP 301 W. HALLANDALE BEACH BOULEVARD HALLANDALE BEACH, FL 33009	7. Name and Address of New Registered Agent Name Alan Benenson Street Address (P.O. Box Number is Not Acceptable) 1930 Harrison Street, Suite 502 City Hollywood FL Zip Code 33020
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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  ALAN BENENSON 3/14/08
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**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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	L06000060127 MARASOF HOLDINGS, LLC 1930 HARRISON STREET, SUITE 502 HOLLYWOOD, FL 33009	STREET ADDRESS	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		CITY - ST - ZIP	
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L06000060127  
04/03/08-80056-016-500.00

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

SIGNATURE:  ALAN BENENSON 3-14-08 954-927-2717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Only

Daytime Phone #

STAPLE CHECK HERE