2007 LIMITED PARTNETT IP ANNUAL REPORT Due By May 1, 2007

Due by may 1, 2001									
DOCUMENT # A9500001082 1. Entity Name GUGEL EAST COAST LIMITED PARTNERSHIP						FILED 07 MAY 18 AM 9: 42			
Principal Place of Business 610 W. LAS OLAS BLVD. FT. LAUDERDALE, FL 33312		Mailing Address P.O. BOX 976 AUBURNDALE, FL 33823		SECRETARY OF STATE TALLAHASSEE, FLORIDA					
Principal Place of Business - No P.O. Box # Mailing Address									
City & State	Orange ST. #8	Suite, Apt. #, etc. City & State		04152007 Chg-LP CR2E003 (12/06) 4. FEI Number Applied For Not Applicable					
Zip Zip 33823 Country 701K		Zip	Country			of Status Desired		Not Applicable 3.75 Additional e Required	
	6. Name and Address of Current F	<u> </u>		7. Name and	Address of New R	egistered Ag	ent		
GUGEL MANAGEMENT CORP. 610 W. LAS OLAS BLVD. FT. LAUDERDALE, FL 33312				Israel Address (P.O. Box Number is Not Acceptable) 317 5, Tennessee Ave.					
			City	Lak.	لمدماه		FL	Zip Code	
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 Rorida. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed or printed-forme of registated aftert angulated approache.									
FILE NOWIII 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	P95000054570 GUGEL MANAGEMENT CORP.		STREET ADDRESS		P.O.Box 976				
STREET ADDRESS CITY-ST-ZIP	610 W. LAS OLAS BLVD. FT. LAUDERDALE, FL 33312		CITY-ST-ZIP	F	Auburndale, Fl. 33823				
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DOCUMENT # NAME			STREET ADDRESS	;					
STREET ADDRESS CITY-ST-ZIP			CNY-ST-ZIP				DR	X	
14. I hereby	certify that the information supplied with	this filing does not qualify for	the exemption	s containe	ed in Chanter 119	Horida Statutes	Liturther certif	v that the information	

14. I hereby certify that the information supplied with this filling 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.

Constitute Oneld C. Gery / true