2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Mar 25, 2008 08:00 AM
Secretary of State

DOCUMENT # A98000001716

1. Entity Name
740 ASSOCIATES, LTD.

Principal Place of Business
407 LINCOLN ROAD, SUITE 9F
MAIMI BEACH, FL 33139

Mailing Address
407 LINCOLN ROAD, SUITE 9F
MAIMI BEACH, FL 33139

03042008 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0860487
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

COMRAS, MICHAEL
C/O THE COMRAS COMPANY OF FLORIDA
407 LINCOLN RD., STE. 9F
MIAMI BEACH, FL 33139

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, 2008, 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 #	P98000061917
NAME	740 COLLINS, INC.
STREET ADDRESS	407 LINCOLN ROAD, SUITE 9F
CITY-ST-ZIP	MAIMI BEACH, FL 33139
DOCUMENT #	
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04/09/08-80055-014 500.00

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: _____ 3/12/08 305 532 0433
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #