500. W

2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 6, 2006

SIGNATURE:

•	Due By Sep	otember 6, 2006	;		SECR	FTARY OF A	O T 6.2 m	
DOCUMENT # A98000002123					DIVISION	ETARY OF S LOF CORPO	PATIONS	
Entity Name RONAN INVESTMENT LIMITED PARTNERSHIP					06 OC	T 13 AM	9: 3 =	
Principal Place of Business 6697 SW 70TH AVE. MIAMI, FL 33143		Mailing Address 6697 SW 70TH AVE. MIAMI, FL 33143	6697 SW 70TH AVE.					III (4888 11180 8 1 (98 1
2. Principal Place of Business 3. Mailing Address								
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		08292006	Chg-LP	CR2E003 (11/05)
City & State		City & state	City & State		4. FEI Number 65-09081	 168		Applied For Not Applicable
Zip Country		Zip	Country		5. Certificate of	Status Desired		75 Additional Required
	6. Name and Address of Curre	ent Registered Agent			7. Name and A	ddress of New R	egistered Agen	t
RONAN INVESTMENTS, INC. 6697 S.W. 70TH AVE. MIAMI, FL 33143				7022	South Le Jeune Rd.			
			-	City C	1- 1-100 FL Zip Code 33134			
8. The above	named entity submits this statemen	t for the purpose of changing its	registered	d office or register	red agent, or both,	in the State of Flo	rida. I am famili	ar with, and accept
the obligation	lions of registered agent.	Lela						
	Signature, typed or printed name of registered ag	ent and tale if applicable.					DATE	
	FILE NOW!!! FEI Due by Septemb					In accordance the limited pa prior notice.	e with s. 607.1 artnership did r	193(2)(b), F.S., not receive the
	A GENERAL PARTNER	R THAT IS A BUSINESS EN MAY NOT be changed on th	TITY MU	IST BE REGIST	FERED AND AC	TIVE WITH THI	S OFFICE.	-
12.		VER INFORMATION	13.	an amendmer	it must be filed	ADDRESS CHA		•
DOCUMENT #	P98000011943					THE STREET OF IT	MOEG CITE!	
NAME	RONAN INVESTMENTS, INC.		STREET	T ADDRESS				
STREET ADDRESS CITY-ST-ZIP	6697 S.W. 70TH AVE. MIAMI, FL 33143		CITY-S	ST - ZIP			***	
DOCUMENT #			STREET	FADDRESS		100811 10601022	<u> </u>	"∃ *500.00
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document # Name Street address			STREET	ADDRESS				
CITY-ST-ZIP			CITY-S					
indicated	certify that the information supplied on this report is true and accurate a eiver or trustee empowered to execu	nd that my signature shall have t	ne same l	legal ettect as it m	d in Unapter 119, f nade under oath; th	-lorida Statutes, I nat I am a Genera	turther certify th I Partner of the f	at the information imited partnership

Date

Daytime Phone #