2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Jan 11, 2006 08:00 AN DOCUMENT # A99000000173 **Secretary of State** THE HWANG FAMILY LIMITED PARTNERSHIP Principal Place of Business : . . . Mailing Address 3050 N.E. 47TH STREET 3050 N.E. 47TH STREET FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308 01052006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0891144 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HWANG, HUA-MEI DO NOT WRITE 3050 N.E. 47TH STREET FORT LAUDERDALE, FL 33308 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 Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$500.00 150 After May 1, 2006, 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. GENERAL PARTNER INFORMATION 12. 01/12/06 00003 912 500.ML DOCUMENT # P98000063050 ... HWANG FAMILY CORP. STREET ADDRESS 3050 N.E. 47TH STREET U000000382310 CITY-ST-ZIP FORT LAUDERDALE, FL 33308 01/12/06-80003-012 500.00 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # 오픈 NAME STREET ADDRESS CITY-ST-ZIP

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 President Secretary.

SIGNATURE:

DOCUMENT # HAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #