## 2007 LIMITED PARTNERSHIP ANNUAL REPORT

## **FILED** Due By May 1, 2007 Apr 30, 2007 08:00 AM Secretary of State **DOCUMENT # B04000000509** INTERNACIONAL REALTY MANAGEMENT, LTD. Principal Place of Business Mailing Address 405 N. ST. MARYS STREET, SUITE 850 405 N. ST. MARYS STREET, SUITE 850 SAN ANTONIO, TX 78205 SAN ANTONIO, TX 78205 02232007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number 20-1837680 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. DO NOT WRITE 2731 EXECUTIVE PARK DRIVE SUITE 4 IN THIS SPACE WESTON, FL 33331 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, lyped or printed name of registered agent and title if applicable 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. GENERAL PARTNER INFORMATION 12. M04000005110 DOCUMENT # NAME INTERNACIONAL REALTY MANAGEMENT GP. LLC STREET ADDRESS 405 N. ST. MARYS STREET, SUITE 850 CITY-ST-ZIP SAN ANTONIO, TX 78205 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS DO NOT WRIT CITY-ST-ZIP IN THIS SPACE DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT #

Applied For

Not Applicable

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:

STREET ADDRESS CITY-ST-ZIP DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP

AND TYPES OR PRINTED NAME OF SIGNING GENERAL PARTNE