


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A97000001897 1. Entity Name LEHRER FAMILY INVESTMENT CO., LTD.						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 06 FEB -2 AM 10:16	
Principal Place of Business 936 INTRACOASTAL DRIVE, APT. 21-C FORT LAUDERDALE, FL 33308				Mailing Address 2100 E. COMMERCIAL BLVD. FT. LAUDERDALE, FL 33308			
2. Principal Place of Business <i>2100 E. commercial Blvd</i> Suite, Apt. #, etc. <i>NA</i>				3. Mailing Address <i>same</i> Suite, Apt. #, etc.			
City & State <i>FT. lauderdale FL</i> Zip <i>33308</i> Country <i>USA</i>				City & State 4. FEI Number 65-0777556 Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				01232006 Chg-LP CR2E003 (11/05)			
6. Name and Address of Current Registered Agent LEHRER, THEODOR 2100 E. COMMERCIAL BLVD. FORT LAUDERDALE, FL 33308				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City 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 Florida. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>							
FILE NOW!!! FEE IS \$500.00 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.							
12. GENERAL PARTNER INFORMATION				13. ADDRESS CHANGES ONLY			
DOCUMENT #	THEODOR LEHRER, TRUSTEE			STREET ADDRESS			
NAME	2100 E. COMMERCIAL BLVD.			CITY-ST-ZIP	800065863018		
STREET ADDRESS	FT. LAUDERDALE, FL 33308			CITY-ST-ZIP	02/15/06-01004-015 **\$30.00		
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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: <i>Thawar Khan</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER				01-24-06 954-772-0933 Date Daytime Phone #			

STAPLE CHECK HERE