

# **2006 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A11382

Entity Name: PINES VENTURES, LTD.

**FILED**  
**Apr 26, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

3301 PONCE DE LEON BLVD, PH  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

3301 PONCE DE LEON BLVD.  
PH SUITE  
CORAL GABLES, FL 33134

**Current Mailing Address:**

3301 PONCE DE LEON BLVD, PH  
CORAL GABLES, FL 33134

**New Mailing Address:**

3301 PONCE DE LEON BLVD.  
PH SUITE  
CORAL GABLES, FL 33134

FEI Number: 59-2139841

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PINES GROUP, INC  
3301 PONCE DE LEON BLVD  
PH-SUITE  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: 125813  
Name: PINES GROUP, INC.  
Address: 3301 PONCE DE LEON BLVD, PH  
City-St-Zip: CORAL GABLES, FL 33134

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DR. RICARDO PINES

PRES

04/26/2006

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date