

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
May 10, 2006 08:00 AM
Secretary of State

DOCUMENT # A04000000990

1. Entity Name
GABOR LIMITED PARTNERSHIP



Principal Place of Business
**1111 KANE CONCOURSE, SUITE 504
BAY HARBOR ISLANDS, FL 33154**

Mailing Address
**1111 KANE CONCOURSE, SUITE 504
BAY HARBOR ISLANDS, FL 33154**



04042006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1418918

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ROZENCWAIG, LESLIE A ESQ.
C/O ROZENCWAIG & FERRERO-CARR
301 WEST HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009**

**DO NOT WRITE
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

DATE

**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

DOCUMENT # **L04000040835**
NAME **GABOR HOLDINGS LLC**
STREET ADDRESS **1111 KANE CONCOURSE, SUITE 504**
CITY-ST-ZIP **BAY HARBOR ISLANDS, FL 33154**

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**U00000564096
05/20/06-80044-006 508.75**

**DO NOT WRITE
IN THIS SPACE**

STAPLE CHECK HERE

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

44.06305.805-K