2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 6, 2006 Jul 11, 2006 08:00 AM Secretary of State **DOCUMENT # A03000001674** THE ZEMPIRE LIMITED PARTNERSHIP LLLP LAVIE Principal Place of Business Mailing Address 100 N. BISCAYNE BLVD, 27TH FLOOR 100 N. BISCAYNE BLVD, 27TH FLOOR MIAMI, FL 33132-2309 MIAMI, FL 33132-2309 07052006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 20-0079041 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent ZYSCOVICH, BERNARD DO NOT WRITE 100 N. BISCAYNE BLVD, 27TH FLOOR MIAMI, FL 33132-2309 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, typed or printed name of registered agent and title if applicable In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice. FILE NOW!!! FEE IS \$500.00 Due by September 6, 2006 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. DOCUMENT# NAME ZYSCOVICH, BERNARD STREET ADDRESS 100 N. BISCAYNE BLVD, 27TH FLOOR CITY-ST-ZIP MIAMI, FL 331322309 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

U00000569412 07/11/06-80024-014 908.75

FILED

Applied For

\$8.75 Additional

Fee Required

Not Applicable

DO NOT WRITE IN THIS SPACE

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14. I hereby indicated or the red	certify that the information supplied with this filing does not qualify for it on this report is true and accurate and that my signature spar pave the ceiver or trustee empowered to execute this report as required by Chap	the exemptions contained in e same legal effect as if made ster 620. Florida Statutes	Chapter 119, Fe under oath, th	lorida Statutes. I f at I am a General	urther certify tr Partner of the	nat the infor limited partr	rmation nership

SIGNATURE:

DOCUMENT # NAME

DOCUMENT #

STAPLE CHECK HERE

STREET ADDRESS CITY-SI-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

7/6/2006

305-372-5222

Daytime Phone #