2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DIVISION OF CORPORATIONS DOCUMENT # A0100000040 07 JAN 24 AM 8: 18 CHIAPPETTA INVESTMENTS, LTD. Mailing Address Principal Place of Business 6 TAHOE LANE 6 TAHOE LANE SEA RACH LAKES, FL 33308 SEA RACH LAKES, FL 33308 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E003 (12/06) 01032007 Chq-LP Applied For 4, FEI Number City & State City & State 65-1072998 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired П 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name M&W AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 2101 CORPORATE BLVD. **SUITE 107** BOCA RATON, FL 33431 Zip Code City FL 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, 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 ADDRESS CHANGES ONLY 12. P01000002851 DOCUMENT # STREET ADDRESS CHIAPPETTA HOLDINGS, INC. NAME STREET ADDRESS **6 TAHOE LANE** CITY-ST-ZIP CITY-ST-ZIP SEA RACH LAKES, FL 33308 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS <u>500086232615</u> 01/25/07--01040--023 **50 STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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

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SECRETARY OF STATE