2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Apr 10, 2007 08:00 A Secretary of State

_	001	18.4	FF 8 15	- 4	40	00	$\wedge \wedge$	00	14	4	40	,
ı	OCI	-HV/I	-N		ΑЯ	กบ	w	U.	"	14	4.1	i

1. Entity Name

TARÉK PROPERTIES LIMITED



Principal Place of Business

1108 DEER RUN PLACE VALRICO, FL 33594 Mailing Address

1326 E. LUMSDEN RD BRANDON, FL 33511



03122007 No Chg-LP

CR2E003 (12/06)

Daylime Phone #

4.	FEI Number		Applied For
	59-3509065	 ľ	 Not Applicable
5.	Certificate of Status Desired	\$8.7	Additional pired

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HINES, JAMES P ESQ. HINES & ASSOCIATES, P.A. 315 S. HYDE PARK AVENUE TAMPA, FL 33606

STAPLE CHECK HERE

SIGNATURE:

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 Signature, typed or printed name of registered agent and title if applicable.					
•	одимист, просто развра кане от герпиона врем востине и аррисация.	DAIE				
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.						
12,	GENERAL PARTNER INFORMATION					
DOCUMENT #	P98000041947					
NAME	TAREK MANAGEMENT, INC.					
STREET ADDRESS	1108 DEER RUN PLACE					
CITY-SI-ZIP	VALRICO, FL 33594	U00000696856				
DOCUMENT #		04/18/07-80015-016 500.00				
NAME		DO:000 010 010 010 0				
STREET ADDRESS CITY-ST-ZIP						
DOCUMENT #						
NAME STREET ADDRESS		DO NOT WRITE				
CITY-ST-ZIP		DO NOT WRITE				
DOCUMENT #		IN THIS SPACE				
NAME		IN TINO OF ACE				
STREET ADDRESS						
CITY-ST-ZIP						
DOCUMENT /						
NAME						
STREET ADDRESS						
CITY-ST-ZIP						
DOCUMENT #						
NAME						
STREET ADDRESS						
CITY-ST-ZIP						

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 eath; 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.

Tarile Parlocar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER