## 2008 LIMITED PARTNERSHIP ANNUAL REPORT

## **Due By May 1, 2008**

**DOCUMENT # A0100000468** 

t. Entity Name
3L FAMILY LTD.



**FILED** Jan 10, 2008 08:00 A Secretary of State

Principal Place of Business

201 ALHAMBRA CIRCLE

CORAL GABLES, FL 33134

Mailing Address

201 ALHAMBRA CIRCLE

DO NOT WRITE IN THIS SPACE

CORAL GABLES, FL 33134



01072008 No Chg-LP

CR2E003 (12/06)

4. FEI Number		Applied For
65-1102466		Not Applicable
E. Cartificate of Status Desired	\$8.7	<b>'5</b> Additional

Fee Required

6. Name and Address of Current Registered Agent LEVI, RAY DIR. 001 ALHAMBRA CIRCLE, STE 501 RAL GABLES, FL 33134

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bove 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 gations of registered agent.

12.

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00

GENERAL PARTNER INFORMATION

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.

DOCUMENT # NAME STREET ADDRESS	P01000025666 3L MANAGEMENT INC. 201 ALHAMBRA CIRCLE, STE 501
CITY-ST-ZIP	CORAL GABLES, FL 33134
DOCUMENT #  NAME STREET ADDRESS CITY-S1-ZIP	
DOCUMENT / NAME STREET ADDRESS	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	·

U000000778724 01/11/08-80008-024 138.75

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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 baye 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 NA

GNING GENERAL PARTNER

Davtime Phone #