## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

## FILED Mar 06, 2008 08:00 A Secretary of State

| DOCUMENT # 4000000000   |  |   |                        |  | \$                                    | Secréta              | ry of St                  |
|---|--|---|------------------------|--|---------------------------------------|----------------------|---------------------------|
| DOCUMENT # A0600000936  |  |   |                        |  | ν.                                    | , cu cu              | iry or St                 |
| 1. Entity Name<br>FLAGLER BUILDING, LLLP                                    |  |   |                        |  |                                       |                      |                           |
|   |  |   |                        |  |                                       |                      |                           |
| B   |  |   | CONTR                  | 1                                      |                                       |                      |                           |
| Principal Plac<br>25 SW 2ND /   |  | Mailing Address   |                        |  |                                       |                      |                           |
| 23 3W 2NU /<br>  MIAMI, FL 3  |  | 25 SW 2ND AVE<br>Miami, Fl. 33130                         |                        |  |                                       |                      |                           |
|   |  |   |                        | C INDIGNI INII ANII                    | 12 AMIL GAIN BENI PENI                | 88LII 88IN 88IIN 181 | IB 1018 BN(B)( B) 288(    |
|   |  |   | <del> </del>           |  |                                       |                      |                           |
| DO NOT WRITE IN THIS SPACE  |  |   | CE                     | 03032008 No                            | Chg-LP                                | CR2E003 (1           | 12/06)                    |
|   |  |   |                        | 4. FEI Number                          | <del></del>                           | <u>·</u>             | Applied For               |
|   |  |   |                        | 59-21675                               | 59                                    |                      | Not Applicable            |
|   |  |   |                        | 5. Certificate of S                    | Status Desired                        |                      | 75 Additional<br>Required |
|   | 6. Name and Address of Current                                       | Registered Agent  |                        |  |                                       |                      |                           |
| BLOCK, HENRY  |  |   |                        | DO 1                                   | IOT 140                               |                      |                           |
| 25 SW 2ND AVE   |  |   | DO NOT WRITE           |  |                                       |                      |                           |
| MIAMI, FL 33130   |  |   | IN T                   | HIS SP                                 | ACF                                   |                      |                           |
|   |  |   | , , , , , , , , , , ,  | · •••· • • • • • • • • • • • • • • • • |                                       | ,                    |                           |
|   |  |   |                        |  |                                       |                      |                           |
|   | named entity submits this statement for<br>ions of registered agent. | r the purpose of changing its registe                     | red office or register | red agent, or both, i                  | in the State of Floo                  | rida. I am famili    | ar with, and accept       |
| SIGNATURE   |  |   |                        |  |                                       |                      |                           |
| Signature typed or printed name of registered agent and title it applicable |  |   |                        |  | · · · · · · · · · · · · · · · · · · · | DATE                 |                           |
| FILE NOW!!! FEE IS \$500.00<br>After May 1, 2008, Fee will be \$900.00      |  |   |                        |  |                                       |                      |                           |
|   |  | HAT IS A BUSINESS ENTITY I<br>Y NOT be changed on the for |                        |  |                                       |                      |                           |
| 12.   | GENERAL PARTNER  |   | ii, aii aiiieriaiiiei  | it titust be filed i                   | o change a ge                         | neral partiter       | •                         |
| DOCUMENT #  | L06000074085   |   |                        |  |                                       |                      |                           |
| NAME.   | FLAGLER BUILDING GP, LLC   |   |                        |  |                                       |                      |                           |
| STREET ADDRESS CITY-ST-ZIP  | 25 SW 2ND AVE<br>MIAMI, FL 33130                                     |   |                        |  |                                       |                      |                           |
| DOCUMENT #  | 1111 1111, 1 2 00100   |   |                        |  |                                       |                      |                           |
| NAME  |  | 1   |                        |  | 1 1.00. 00. 00. 00. 00.               |                      |                           |
| STREET ADDRESS<br>CITY-ST-ZIP   |  |   |                        |  | 000000<br>-03/21/08                   | 850022<br>20045-20   | i soo oo                  |
| DOCUMENT #  |  | · · · ·   |                        |  | UJ/ ⊆1/ UÖ‴                           | UUUTATUU             | ո օստ.ՍՄ                  |
| NAME  |  |   |                        |  |                                       |                      |                           |
| STREET AUDRESS  |  |   |                        | DO N                                   | OT WF                                 | RITE                 |                           |
| CITY-ST-ZIP   |  |   |                        |  |                                       |                      |                           |

CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

NAME
STREET ADDRESS
CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does no conditive 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 spall 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 employered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

DOCUMENT #

NAME
STREET ADDRESS
CITY-SI-ZIP
LICCUMENT /
NAME
STREET ADDRESS
CITY SI-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

13/08 3

ZK 358-5510

Daytime Phone ≢