

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000001294

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** SABET FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

5660 COLLINS AVE., APT. 18A-B  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

5660 COLLINS AVE., APT. 18A-B  
APT 18AB  
MIAMI BEACH, FL 33140 UN

**Current Mailing Address:**

5660 COLLINS AVE., APT. 18A-B  
MIAMI BEACH, FL 33140

**New Mailing Address:**

**FEI Number:** 20-5958916

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SABET, MICHAEL A  
5660 COLLINS AVE  
18A  
MIAMI BEACH, FL 33140 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: SABET FAMILY HOLDINGS, L.C.

Address: 5660 COLLINS AVE., APT. 18A-B

City-St-Zip: MIAMI BEACH, FL 33140

**ADDRESS CHANGES ONLY:**

Address:

City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: MICHAEL SABET

MGRM

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date