



**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**Apr 20, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # A00000000029</b> 1. Entity Name <b>LEONARD BRAWER FAMILY LIMITED PARTNERSHIP</b> <b>NO. 2</b>	
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Principal Place of Business <b>7771 WEST OAKLAND PARK BLVD.,</b> <b>SUITE 140</b> <b>SUNRISE, FL 33351</b>	Mailing Address <b>7771 WEST OAKLAND PARK BLVD.,</b> <b>SUITE 140</b> <b>SUNRISE, FL 33351</b>
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**DO NOT WRITE IN THIS SPACE**



04032007 No Chg-LP      CR2E003 (12/06)

4. FEI Number <b>65-0980008</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>BRAWER, MARC H ESQ.</b> <b>7771 WEST OAKLAND PARK BLVD.</b> <b>SUITE 140</b> <b>SUNRISE, FL 33351</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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 # NAME STREET ADDRESS CITY-ST-ZIP	<b>P96000062597</b> <b>LEONARD BRAWER FAMILY HOLDINGS, INC.</b> <b>7771 WEST OAKLAND PARK BLVD., SUITE 140</b> <b>SUNRISE, FL 33351</b>
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05/01/07-80131-001 500.00

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 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:**  **4/10/07** **954 749 0066**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER      Date      Daytime Phone #

STAPLE CHECK HERE