

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 MAY 26 AM 9:47

DOCUMENT # A00000000147

1. Entity Name
 DAZI LTD.



Principal Place of Business
 3869 N.W. ROYAL OAK DRIVE
 JENSEN BEACH, FL 34957

Mailing Address
 3869 N.W. ROYAL OAK DRIVE
 JENSEN BEACH, FL 34957

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country



04072006 Chg-LP CR2E003 (11/05)

4. FEI Number
 65-0974826

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
 GEOFFREY I. MCKELVEY
 3869 N.W. ROYAL OAK DRIVE
 JENSEN BEACH, FL 34957

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 fee if applicable

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, 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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	L00000000747 ZADI, LL 3869 N.W. ROYAL OAK DRIVE JENSEN BEACH, FL 34957	STREET ADDRESS CITY-ST-ZIP	800076106628 06/12/06--01049--003 **800.00
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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: Geoffrey McKelvey Personal Representative 4/7/2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

*Geoffrey McKelvey, Sole member of ZADI, LLC
 IT'S GORENTH PARTNER*

STAPLE CHECK HERE