2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

May 01, 2006 08:00 AM Secretary of State **DOCUMENT # A00000000429** 1.*Entity Name THE JLG & S PEREZ FAMILY LIMITED PARTNERSHIP Principal Place of Business Mailing Address P.O. BOX 560040 13200 S.W. 128TH STREET STE F-1 MIAMI, FL 33256 MIAMI, FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04222006 Chg-LP CR2E003 (11/05) City & State City & State 4. FEI Number Applied For 65-1092751 Not Applicat Zìp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEREZ, JULIO C 13200 SW 128TH STREET Street Address (P.O. Box Number is Not Acceptable) STE F-1 MIAMI, FL 33186 City 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 acce the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE FILE NOW!!! FEE 13 \$500,00 After May 1, 2006, Fee will be \$800.00 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 # STREET ADDRESS PEREZ, JULIO C NAME STREET ADDRESS 13200 SW 128TH STREET, STE F-1 COY-ST-ZIP CITY-ST-ZIP MIAMI, FL DOCUMENT # STREET ADDRESS NAME U00000554706 STREET ADDRESS 05/16/06-80003-025 500.00 CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS COY-ST-ZIP City-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP GITY-ST-21P DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not quality 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 it made under eath, that I am a General Partner of the limited partners or the receiver or trustee empowered to execute this report as required by Chapter 520, Florida Statutes

SIGNATURE:

May JCPern

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