

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # A00000000547		
1. Entity Name FLATAUR RC, LTD.		

Principal Place of Business 1350 EAST NEWPORT CENTER DRIVE SUITE 206 DEERFIELD BEACH, FL 33442	Mailing Address 1350 EAST NEWPORT CENTER DRIVE SUITE 206 DEERFIELD BEACH, FL 33442
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04212006 No Chg-LP CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1007686	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  KAY, JAMES R ESQ KAY LAW OFFICES 700 VILLAGE SQUARE CROSSING., SUITE 102B PALM BEACH GARDENS, FL 33410
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**DO NOT WRITE IN THIS SPACE**

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, 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.**

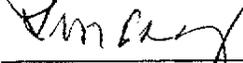
12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P00000025408 REACOM, INC. 1350 EAST NEWPORT CENTER DRIVE, STE 206 DEERFIELD BEACH, FL 33442
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

000000557412  
 05/17/06-80050-003 508.75

**DO NOT WRITE IN THIS SPACE**

STAPLE CHECK HERE

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:  Linda G. Kassof 04/27/2006 (954) 428-4585  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #