

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 10, 2007 08:00 AM
Secretary of State

DOCUMENT # A00000000666

1. Entity Name
GABLES PARK TOWER, LTD.



Principal Place of Business
**550 BILTMORE WAY, STE. 740
CORAL GABLES, FL 33134**

Mailing Address
**550 BILTMORE WAY, STE. 740
CORAL GABLES, FL 33134**



03282007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1000715	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KING, RUSSELL L ESQ
C/O CAMNER, LIPSITZ & POLLER, PA
550 BILTMORE WAY, SUITE 700
CORAL GABLES, FL 33134**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

DATE _____

**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 #	L00000004323
NAME	GABLES PARK TOWER, LLC
STREET ADDRESS	550 BILTMORE WAY, STE. 740
CITY-ST-ZIP	CORAL GABLES, FL 33134

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04/18/07-80073-002 500.00**

**DO NOT WRITE
IN THIS SPACE**

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:

Mayren R. Castro **Mayren R. Castro**

4/2/07

305 448-4091

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE