2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

DOCUMENT # A00000000704

1. Entity Name

TREASURE COVE ASSOCIATES, LTD.



Principal Place of Business

18851 NE 29TH AVE 7TH FLOOR AVENTURA, FL 33180 Mailing Address

18851 NE 29TH AVE 7TH FLOOR

7TH FL Aventura, Fl. 33180

FILED May 02, 2008 08:00 AN Secretary of State



04302008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-1011511 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

POSNER, GARY D 18851 NE 79TH AVE. 7TH FL AVENTURA, FL 33180

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		
FILE NOW!!! FEE IS \$500.00 After May 1, 2008, 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		
DOCHMENT #	P00000042065	}	
NAME	TREASURE COVE ASSOCIATES, INC.		
STREET ADDRESS	18851 NE 29TH AVE 7TH FLOOR	U00000943586	
CHY-SI-ZP	AVENTURA, FL 33180		
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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:

STREET ADDRESS CITY-ST-ZIP

MATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTHER

4/30/08

3054664507

Daytme Phone #