2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # A00000000860

1. Entity Name

PRESIDENTIAL SUITES INVESTMENTS-I, LLLP



FILED
Mar 06, 2008 08:00 A
Secretary of State

Principal Place of Business

2875 NE 191ST STREET

SUITE 400

AVENTURA, FL 33180

Mailing Address

2875 NE 191ST STREET

SUITE 400

AVENTURA, FL 33180



DO NOT WRITE IN THIS SPACE

01102008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-1022643

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GORDON, MARK J 2875 NE 191ST STREET SUITE 400 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 obligations of registered agent.	the State of Florida. I am familiar with, and accept
SIGNATURE Signature hyped or printed name of registered agent and title it applicable	DATE

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

-	NOTE: General Partners WAY NOT be changed on the		
Ī	12. GENERAL PARTNER INFORMATION		
Į	DOCUMENT /	P00000051415	
	NAME	PRESIDENTIAL SUITES INVESTMENTS-I GP, INC.	
	STREET ADDRESS	2875 NE 191ST STREET, SUITE 400	
	CITY-ST-ZIP	AVENTURA, FL 33180	
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1	DOCUMENT #		
5	NAME		
	STREET ADDRESS		

DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this fitting 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 acquirate 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 judiced by Chapter 620, Florida Statutes.

SIGNATURE:

CITY - ST- ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

LOXK. 7 - WAGO

2/12/18

(305) 370-71W

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