

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007

SECRET
 DIVISION

07 JUL 2007 PH 3: 38

DOCUMENT # A00000001432

1. Entity Name
ROBO PARTNERS LTD.



Principal Place of Business
**4381 WHITE CEDAR LANE
 DELRAY BEACH, FL 33445**

Mailing Address
**4381 WHITE CEDAR LANE
 DELRAY BEACH, FL 33445**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

07162007 Chg-LP CR2E003 (12/06)

City & State

City & State

4. FEI Number

13-4127273

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, ROSLYN
 4381 WHITE CEDAR LANE
 DELRAY BEACH, FL 33445**

Name
Roger Lavoie

Street Address (P.O. Box Number is Not Acceptable)

9960 Pineapple Tree Drive - Bldg #1 Apt. 203

City **Boyton Beach**

FL

Zip Code **33436**

8. The above named entity submits this report 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 registration.

SIGNATURE

Roger Lavoie

7/19/07

DATE

**FILE NOW!!! FEE IS \$900.00
 On or after September 14, 2007, Fee will be \$1000.00**

**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 #	NAME	STREET ADDRESS	CITY - ST - ZIP	
	ESTATE OF ROBERT SMITH	4381 WHITE CEDAR LANE		
	DELRAY BEACH, FL 33445			
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP	
	SMITH, ROSLYN	4381 WHITE CEDAR LANE		
	DELRAY BEACH, FL 33445			
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP	
	SMITH, HOWARD	5 DEEPWOOD COURT		
	OLD WESTBURY, NY 11568			
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP	
	SMITH, PENNY	2 PARTRIDGE LANE		
	OLD WESTBURY, NY 11568			
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP	
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP	

**000107053020
 08/01/07--01007--008 **925.00**

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:

Howard Smith

7/19/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED GENERAL PARTNER

Date

Date of Filing

STAPLE CHECK HERE