

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 APR 24 AM 10:41

**DOCUMENT # A00000001503**

1. Entity Name  
HAUSFELD, LTD.



Principal Place of Business  
C/O MORRIS KIRSH, C.P.A.  
326 71ST STREET  
MIAMI BEACH, FL

Mailing Address  
C/O MORRIS KIRSH, C.P.A.  
326 71ST STREET  
MIAMI BEACH, FL

**DO NOT WRITE IN THIS SPACE**



04062006 No Chg-LP

CR2E003 (11/05)

4. FEI Number

65-1043145

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

KIRSH, MORRIS C.P.A.  
C/O KIRSH, GIDNEY & COMPANY  
326 71ST STREET  
MIAMI BEACH, FL

**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, 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 # P00000091333  
NAME ADHAU, INC.  
STREET ADDRESS 326 71ST STREET  
CITY-ST-ZIP MIAMI BEACH, FL 33141

DOCUMENT #  
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CITY-ST-ZIP

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05/05/06--01043--025 \*\*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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE