2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

CHECK

SIGNATURE:

SIGNATURE AND TWEETOR PRINTED NAME OF SIGNING GENERAL PARTNER

FILED **DOCUMENT # A0000001601** THE DIEGO MELIANS FAMILY LIMITED PARTNERSHIP 2007 MAY 10 AM 10: 25 SECRETARY OF STATE TALLAHASSEE. FLORIDA Principal Place of Business Mailing Address 4759 PALM AVE. SUITE 260 4759 PALM AVE. SUITE 260 HIALEAH, FL 33012 HIALEAH, FL 33012 04272007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1063072 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MELIANS, DIEGO DO NOT WRITE 4759 PALM AVE. SUITE 260 HIALEAH, FL 33012 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. DATE Signature, typed or printed name of registered agent and title if applicable. 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. GENERAL PARTNER INFORMATION 12. P00000099602 DOCUMENT # MELIANS MANAGEMENT CORPORATION NAME STREET ADDRESS 4759 PALM AVE. SUITE 260 CITY-ST-ZIP HIALEAH, FL 33012 DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZP DOCUMENT (NAME STREET ADDRESS CITY-ST-ZIP DOCHMENT # NAME STREET ADDRESS CITY-ST-ZIP 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