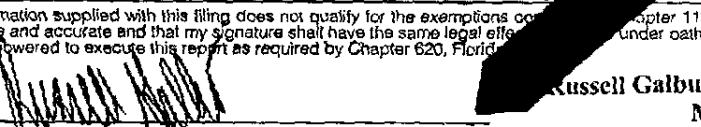


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # A00000001673																										
<p>1. Entity Name HARBOUR PLACE DEVELOPMENT, LTD.</p>																										
<p>Principal Place of Business 2930 BISCAYNE BLVD. MIAMI, FL 33137</p>		<p>Mailing Address 2930 BISCAYNE BLVD. MIAMI, FL 33137</p>																								
<p>DO NOT WRITE IN THIS SPACE</p>																										
<p>02142006 No Chg-LP CR2E003 (11/05)</p>																										
<table border="1"> <tr> <td>4. FEI Number 59-3679882</td> <td><input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable</td> </tr> <tr> <td colspan="2">5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required</td> </tr> </table>			4. FEI Number 59-3679882	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																					
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																										
<p>6. Name and Address of Current Registered Agent</p> <p>CHRISTENBURY, SHARON ESQ 2930 BISCAYNE BOULEVARD MIAMI, FL 33137</p>		<p>DO NOT WRITE IN THIS SPACE</p>																								
<p>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.</p>																										
<p>SIGNATURE <small>(Signature, typed or printed name of registered agent and title if applicable)</small> DATE <small>(Date)</small></p>																										
<p>FILE NOW!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00</p>																										
<p>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.</p>																										
<p>12. GENERAL PARTNER INFORMATION</p> <table border="1"> <tr> <td>DOCUMENT # P00000102843</td> <td>NAME HARBOUR PLACE INC</td> </tr> <tr> <td>STREET ADDRESS 2930 BISCAYNE BLVD.</td> <td>CITY-ST-ZIP MIAMI, FL 33137</td> </tr> <tr> <td>DOCUMENT #</td> <td>NAME</td> </tr> <tr> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> </tr> <tr> <td>DOCUMENT #</td> <td>NAME</td> </tr> <tr> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> </tr> <tr> <td>DOCUMENT #</td> <td>NAME</td> </tr> <tr> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> </tr> <tr> <td>DOCUMENT #</td> <td>NAME</td> </tr> <tr> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> </tr> <tr> <td>DOCUMENT #</td> <td>NAME</td> </tr> <tr> <td>STREET ADDRESS</td> <td>CITY-ST-ZIP</td> </tr> </table>			DOCUMENT # P00000102843	NAME HARBOUR PLACE INC	STREET ADDRESS 2930 BISCAYNE BLVD.	CITY-ST-ZIP MIAMI, FL 33137	DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP	DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP	DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP	DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP	DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
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<p>STAPLE CHECK HERE</p>																										
<p>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.</p>																										
<p>Russell Galbut, Trustee of RF Business Trust, Managing Member, 2/14/06 305.374.5700</p>																										
<p>SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small></p>																										