

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

**FILED  
Jan 11, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # A0000001866**

1. Entity Name  
**A.D. FISCHER ENTERPRISES, LTD.**



Principal Place of Business  
**9130 S DADELAND BLVD.  
SUITE 1623  
MIAMI, FL 33156-7851**

Mailing Address  
**9130 S DADELAND BLVD.  
SUITE 1623  
MIAMI, FL 33156-7851**



01052006 No Chg-LP CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-1061710</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

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

**FISCHER FAMILY TRUST  
9130 S DADELAND BLVD.  
SUITE 1623  
MIAMI, FL 32156-7851**

**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 #	
NAME	<b>LANCELLA, PABLO TRUSTEE</b>
STREET ADDRESS	<b>9130 S. DADELAND BLVD., SUITE 1623</b>
CITY-ST-ZIP	<b>MIAMI, FL 331567851</b>

1000000382340  
01/12/06-80004-016 500.00

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STAPLE CHECK HERE

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

*Pablo Lancell* TRUSTEE

*1/5/06*

Date

*305-670-4848*

Daytime Phone #