


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

**FILED
May 06, 2006 08:00 AM
Secretary of State**

DOCUMENT # A01000000038	
1. Entity Name 3005 ACQUALINA PARTNERS, LTD.	

Principal Place of Business 1250 EAST HALLANDALE BEACH BLVD, STE 1008 HALLANDALE BEACH, FL 33009	Mailing Address 1250 EAST HALLANDALE BEACH BLVD, STE 1008 HALLANDALE BEACH, FL 33009
--	--

DO NOT WRITE IN THIS SPACE



04132006 No Chg-LP	CR2E003 (11/05)
4. FEI Number 65-1083427	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARBIN, EVAN
48 EAST FLAGLER STREET, PENTHOUSE 104
MIAMI, FL 33131

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

100000541885
05/10/06-80075-019 500.00

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 #	L00000007296
NAME	EXPONENTIAL GROWTH PARTNERS, L.L.C.
STREET ADDRESS	48 EAST FLAGLER ST., PH-104
CITY-ST-ZIP	MIAMI, FL 33131
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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 BY: Lorraine Tinsky LORRAINE TINSKY, MGRM (305) 371-2248

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #