

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

08 MAY -7 AM 8:01

**DOCUMENT # A01000000086**

1. Entity Name  
**THE MUY FAMILY LIMITED PARTNERSHIP**



Principal Place of Business  
**3251 EAST 11TH AVENUE  
 HIALEAH, FL 33013**

Mailing Address  
**190 W. 51 STREET  
 HIALEAH, FL 33012**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04072008 Chg-LP CR2E003 (12/06)

City & State

City & State

4. FEI Number

**03-0409564**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RICHMAN, SCOTT G ESQ.  
 19 WEST FLAGLER STREET, 14TH FLOOR  
 MIAMI, FL 33130**

Name

**Scott G. Richman, Esq.**

Street Address (P.O. Box Number is Not Acceptable)

**Chapin, Ballerano & Cheslack**

**1201 George Bush Boulevard**

City

**Delray Beach**

FL

Zip Code

**33483**

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.

**4/11/08**  
 DATE

**FILE NOW!!! FEE IS \$500.00  
 After May 1, 2008, 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

13. ADDRESS CHANGES ONLY

DOCUMENT # **P01000004676**  
 NAME **MUY REALTY, INC.**  
 STREET ADDRESS **190 W. 51ST STREET**  
 CITY-ST-ZIP **HIALEAH, FL 33012**

STREET ADDRESS

CITY-ST-ZIP

**200128679072**

**05/07/08--01005--015 \*\*\$500.00**

DOCUMENT #  
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 CITY-ST-ZIP

STREET ADDRESS

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STREET ADDRESS

CITY-ST-

14. I hereby certify that the information supplied with this filing does not qualify for the exemption provided 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: **\*Wei-Hai Ching**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

President **4/17/08 305-216-1108**  
 Date Daytime Phone #

STAPLE CHECK HERE