## .2006 LIMITED PARTNERSHIP ANNUAL REPORT

STAPLE CHECK

SIGNATURE:

## Due By May 1, 2006 FILED **DOCUMENT # A01000000184** 06 APR 27 AM 10: 18 1. Entity Name DACRA DESIGNMIAMI, LTD. Principal Place of Business Mailing Address 1632 PENNSYLVANIA AVE. 1632 PENNSYLVANIA AVE. C/O CRAIG ROBINS C/O CRAIG ROBINS MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 04132006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1081012 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROBINS, CRAIG DO NOT WRITE 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139 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. GENERAL PARTNER INFORMATION 12. DOCUMENT # P01000012997 DACRA DESIGNMIAMI, INC. NAME 1632 PENNSYLVANIA AVE. STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 DOCUMENT # 5000**74146545** 05/08/06--01014--006 \*\*667.50 STREET ADORESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP this fling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information hat my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership his report as required by Chapter 620, Florida Statutes 14. I hereby certify that the informal indicated on this report is true or the receiver or trustee emporary. ion supplied with nd acquirate and

305-531-8 700