


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

**FILED
Feb 05, 2007 08:00 AM
Secretary of State**

DOCUMENT # A01000000384
1. Entity Name
MILPORT INVESTORS, LLLP



Principal Place of Business Mailing Address
3711 S.W. 27TH STREET 3711 S.W. 27TH STREET
MIAMI, FL 33134 MIAMI, FL 33134

DO NOT WRITE IN THIS SPACE



01252007 No Chg-LP CR2E003 (12/06)

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 65-1090129 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WEISSLER, ROBERT I
2200 MUSEUM TOWER
150 WEST FLAGLER STREET
MIAMI, FL 33130

**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, 2007, 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 # | L01000004078 |
| NAME | NILY, LLC |
| STREET ADDRESS | 3711 S.W. 27TH STREET |
| CITY-ST-ZIP | MIAMI, FL 33134 |
| DOCUMENT # | L01000004068 |
| NAME | PORTER HOUSE, LLC |
| STREET ADDRESS | 3711 S.W. 27TH STREET |
| CITY-ST-ZIP | MIAMI, FL 33134 |
| 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**

U00000621813
02/13/07-80001-001 500.00

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]* 1-29-07 305-444-8326
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #