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

DO NOT WRITE IN THIS SPACE

## DOCUMENT # A0100000464

1. Entity Name

STAPLE CHECK HERE

CITY ST ZIP

SIGNATURE:

EAST/WEST VENTURE PARTNERS I, LLLP



Apr 02, 2007 08:00 A Secretary of State

**FILED** 

Principal Place of Business

13907 CARROLLWOOD VILLAGE RUN TAMPA, FL 33618 Maiting Address

13907 CARROLLWOOD VILLAGE RUN TAMPA, FL 33618



03272007 No Chg-LP

CR2E003 (12/06)

4.	FEI Numbei			Applied For
	59-3696863			Not Applicable
5.	Certificate of Status Desired	1 1 7	8.75	Additional

6. Name and Address of Current Registered Agent

FAIRBANKS, GARY 13014 N DALE MABRY HWY STE. 356 TAMPA, FL 33618

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of changing its regions of registered agent	pistered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept		
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable		DATE		
,	FILE NOW!!! FEE IS \$500.00  After May 1, 2007, Fee will be \$900.0	0	54.2		
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 #	L0000000834				
NAME	CONCORDE CAPITAL PARTNERS, LLC				
STREET ADDRESS	13014 N. DALÉ MABRY, SUITE 356				
CITY ST-ZIP	TAMPA, FL 33618		U00000687749		
DOCUMENT #			04/10/07-80052-014 500.00		
NAME					
STREET ADDRESS					
CITY-S1-ZIP					
D0CuMENT €			•		
NAMŁ					
STREET ADDRESS		DO N	OT WRITE		
CITY-ST-ZIP		15.1	UO ODA OE		
DOCUMENT #		IN IF	IIS SPACE		
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #	;				
NAME -					
STREET ADDRESS					

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 empowers to execute this report as required by Chapter 620, Florida Statutes.