

**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006**

DOCUMENT # A01000000709

1. Entity Name

RICF BEACH, LTD.



FILED

06 MAY -1 AM 8:51

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



Principal Place of Business

**3400 N.E. 34TH STREET, SUITE 101
FORT LAUDERDALE FL 33408**

Mailing Address

**3400 N.E. 34TH STREET, SUITE 101
FORT LAUDERDALE FL 33408**

2. Principal Place of Business

2700 NORTH 29TH AVE.

Suite, Apt. #, etc.

#108

City & State

HOLLYWOOD FL

Zip
33020

Country

USA

3. Mailing Address

2700 NORTH 29TH AVE.

Suite, Apt. #, etc.

#108

City & State

HOLLYWOOD, FL

Zip
33020

Country

USA

1st MOORE

CR2E003 (10/05)

4. FEI Number

06-1629304

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ARON, JERRY E P.A.
2505 METROCENTRE BLVD STE. 301
WEST PALM BEACH FL 33407**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

**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 # **P01000047834**
NAME **RICF BEACH, INC.**
STREET ADDRESS **3400 N.E. 34TH STREET, SUITE 101**
CITY-ST-ZIP **FORT LAUDERDALE FL 33408**

DOCUMENT #
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CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS **2700 NORTH 29TH AVE. #108**
CITY-ST-ZIP **HOLLYWOOD, FL 33020**

STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

**600075012936
05/22/06--01002--007 **\$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:

RICF BEACH, INC.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/11/06

Date

(954) 929-1122

Daytime Phone #