

# 2008 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A01000000733

**FILED**  
**Apr 03, 2008**  
**Secretary of State**

**Entity Name:** VARKAS FAMILY PARTNERSHIP, LTD.

**Current Principal Place of Business:**

155 OCEAN LANE DR., APT. 311  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

155 OCEAN LANE DR., APT. 311  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

FEI Number: 65-1108440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VARKAS, ALEXANDER D JR.  
155 OCEAN LANE DRIVE, APARTMENT 311  
KEY BISCAYNE, FL 33149 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #: P01000049286  
Name: FULCRUM, INC.  
Address: 155 OCEAN LANE DR., APT. 311  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ALEXANDER D. VARKAS J.R.

PRES

04/03/2008

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date