## 2006 LIMITED PARTNERSHIP ANNUAL REPORT **FILED** Due By May 1, 2006 May 01, 2006 08:00 Al Secretary of State DOCUMENT # A01000000959 1. Entity Name MAXIME MEYERS FAMILY LIMITED PARTNERSHIP Mailing Address Principal Place of Business 21477 BURNSIDE CT 21477 BURNSIDE CT BOCA RATON, FL 33433 BOCA RATON, FL 33433 04202006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 65-1124070 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MEYERS, GLENN B DO NOT WRITE 21477 BURNSIDE CT BOCA RATON, FL 33433 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. 4/12/06

Applied For

Not Applicable

	SIGNATURE	Signature, typed of printed name of registered agent and title if applicable.		y	, DATE _	<u>, +, , , , , , , , , , , , , , , , , , </u>
		FILE NOW!!! FEE IS \$500.00 After May 1, 2006 Fee will be \$900.0	og :			
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS ( NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a gene						
1	12.	GENERAL PARTNER INFORMATION	at The second of		en contrading of the contradicts	
	DOCUMENT #  NAME STREET ADDRESS CITY-ST-ZIP	L01000011584 MAXIME MEYERS, LLC 4900 NORTH OCEAN BLVD. FT. LAUDERDALE, FL 33308		UD!	0000554394	ድንሳ ሰብ
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	14. I hereby certify that the information supplied with this filing does not quality 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 secure this report as regained by Chapter 620, Florida Statutes					

SIGNATURE: