

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A01000001147 1. Entity Name ROINA C. ARIAS ENTERPRISES, LTD.	
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FILED
 07 MAY 18 AM 9:42
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



Principal Place of Business BEAU MONDE UNIT #802 4950 GULF BOULEVARD ST. PETERSBURG, FL 33706	Mailing Address BEAU MONDE UNIT #802 4950 GULF BOULEVARD ST. PETERSBURG, FL 33706
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2. Principal Place of Business - No P.O. Box # Boca Sands, F-406 Suite, Apt. #, etc. 5301 Gulf Blvd City & State St. Pete Beach, FL Zip 33706 Country USA	3. Mailing Address Boca Sands, F-406 Suite, Apt. #, etc. 5301 Gulf Blvd City & State St. Pete Beach, FL Zip 33706 Country USA
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04262007	Chg-LP	CR2E003 (12/06)
4. FEI Number 59-3740387	☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent LARRINAGA, ROSARIO A BEAU MONDE UNIT #802 4950 GULF BOULEVARD ST. PETERSBURG, FL 33706	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Boca Sands, F-406 5301 Gulf Blvd City St. Pete Beach FL Zip Code 33706	
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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 <u><i>Rosario A. Larrinaga</i></u> DATE _____ Signature typed or printed name of registered agent and date if applicable	
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT #		STREET ADDRESS	Boca Sands, F-406, 5301 Gulf Blvd
NAME	LARRINAGA, ROSARIO A	CITY - ST - ZIP	St. Pete Beach, FL 33706
STREET ADDRESS	BEAU MONDE UNIT #802, 4950 GULF BLVD.		
CITY - ST - ZIP	ST. PETERSBURG, FL 33706		
DOCUMENT #		STREET ADDRESS	900103627719
NAME	LARRINAGA, ROBERT M	CITY - ST - ZIP	05/31/07--01048--005 **500.00
STREET ADDRESS	5000 GULF BOULEVARD, APT. 703		
CITY - ST - ZIP	ST. PETE BEACH, FL 33706		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			

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 I 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: <u><i>Rosario A. Larrinaga</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date _____ Daytime Phone # _____
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