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

DO NOT WRITE IN THIS SPACE

DOCUMENT # A01000001615

1. Entity Name HOUSTON UPTOWN PROPERTIES, LTD.



FILED Apr 27, 2007 08:00 A Secretary of State

Principal Place of Business 4500 PGA BLVD., SUITE 207 PALM BEACH GARDENS, FL 33418 Mailing Address

4500 PGA BLVD., SUITE 207 PALM BEACH GARDENS, FL 33418



02082007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-1159514 Applied For Not Applicable

\$. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

4500 PGA BLVD., SUITE 207 PALM BEACH GARDENS, FL 33418		IN THIS SPACE
	named entity submits this statement for the purpose of changing its ions of registered agent.	registered 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 it applicable	DATE
	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$90	0.00
		ITITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. he form; an amendment must be filed to change a general partner.
12.	GENERAL PARTNER INFORMATION	
DOCUMENT #	L03000024905	
NAME	H TEX, LLC.	
STREET ADDRESS CITY-ST-ZIP	4500 PGA BLVD.,STE.207 PALM BEACH GARDENS, FL 33418	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	TALKIBEAGITOA (OE110, TE 30410	
DOCUMENT #		7
NAME STREET ADDRESS		DO NOT WRITE
CITY-ST-ZIP		I DO NOT WRITE
DOCUMENT #		IN THIS SPACE

U00000739327 05/14/07-80022-022 500.00

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 keport as required by Chapter 620, Florida Statutes

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP DOCUMENT #

NAME STREET ADDRESS

CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

Otto B. DiVosta

3/28/07

561/691-9050