

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 APR 25 AM 10:46

DOCUMENT # A01000001680	
1. Entity Name LA VAQUITA PROPERTIES, LLLP	



Principal Place of Business 401 MIRACLE MILE SUITE 408 C/O ROBERTO PERKINS CORAL GABLES, FL 33134	Mailing Address 401 MIRACLE MILE SUITE 408 C/O ROBERTO PERKINS CORAL GABLES, FL 33134
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2. Principal Place of Business, No P.O. Box # 9552 SW 57 street	3. Mailing Address 9552 SW 57 street
Suite, Apt., etc. C/O ROBERTO PERKINS	Suite, Apt., etc. C/O ROBERTO PERKINS
City & State Miami, FL	City & State Miami, FL
Zip 33173	Zip 33173
Country USA	Country USA

04082008 Chg-LP CR2E003 (12/06)

4. FEI Number 80-0047057	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required -
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6. Name and Address of Current Registered Agent ARAZOZA & FERNANDEZ FRAGA, P.A. 2100 SALZEDO STREET SUITE 300 CORAL GABLES, FL 33313-4
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7. Name and Address of New Registered Agent Name Corporate Creations Network, Inc. Street Address (P.O. Box Number is Not Acceptable) 11380 PROSPERITY FARMS ROAD # 221E City Palm Beach State FL Zip Code 33410
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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:
 Signature, typed or printed name of registered agent and title if applicable.

4/8/8
 DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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 # NAME STREET ADDRESS CITY-ST-ZIP	L01000021995 SUGAR HOLDINGS, L.C. 401 MIRACLE MILE SUITE 408 CORAL GABLES, FL 33134	STREET ADDRESS CITY-ST-ZIP	9552 SW 57 street Miami, FL 33173
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	100125731341 04/25/08--01005--001 **508.75
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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:
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
 Date: 4/8/8
 Daytime Phone #