

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 16, 2006 08:00 AM
Secretary of State

DOCUMENT # A02000000090

1. Entity Name
G & T OF SOUTH FLORIDA LTD.



Principal Place of Business

2144 JOHNSON STREET
HOLLYWOOD, FL 33020

Mailing Address

2144 JOHNSON STREET
HOLLYWOOD, FL 33020

DO NOT WRITE IN THIS SPACE



02102006 No Chg-LP

CRZE003 (11/05)

4. FEI Number
75-3066089

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COHN, ALAN B
2021 TYLER STREET
HOLLYWOOD, FL 33020

**DO NOT WRITE
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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, 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

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP
T & G OF SOUTH FLORIDA LLC
2144 JOHNSON STREET
HOLLYWOOD, FL 33020

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP

1100000436045
02/27/06-80020-020 500.00

**DO NOT WRITE
IN THIS SPACE**

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:

Alfredo P. Pina

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2-14-06

Date

954-923-3677

Daytime Phone #

STAPLE CHECK HERE