


**2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006**

**FILED
Jan 11, 2006 08:00 AM
Secretary of State**

DOCUMENT # A02000000279	
1. Entity Name THE JACQUES COHEN FAMILY LIMITED PARTNERSHIP	

Principal Place of Business 1441 W. NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442	Mailing Address 1441 W. NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442
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DO NOT WRITE IN THIS SPACE



01062006 No Chg-LP CR2E003 (11/05)

4. FEI Number 01-0657511	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent COHEN, JACQUES 1441 W. NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442
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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 _____ <small>Signature typed or printed name of registered agent and title if applicable</small>	DATE _____
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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 #	P0200007397
NAME	JACQUES COHEN FAMILY CORP.
STREET ADDRESS	1441 W. NEWPORT CENTER DRIVE
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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NAME	
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DOCUMENT #	
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CITY - ST - ZIP	

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01/12/06-80012-019 500.00

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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: 	Date: 1-05-06	Daytime Phone #: 954-480-9202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date	Daytime Phone #