

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

**FILED**  
**Mar 30, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A02000000399**

1. Entity Name  
**PAULINE AND WALLY, LTD.**



Principal Place of Business  
**800 WEST 42ND STREET, APT. 2-A**  
**MIAMI BEACH, FL 33140**

Mailing Address  
**800 WEST 42ND STREET, APT. 2-A**  
**MIAMI BEACH, FL 33140**



03242006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**03-0427799**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**WIENER, MARVIN I**  
**2121 PONCE DE LEON BLVD., SUITE 900**  
**CORAL GABLES, FL 33134**

**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 # **P02000023489**  
NAME **STEADMAN MANAGEMENT CORP.**  
STREET ADDRESS **800 WEST 42ND STREET, APT. 2-A**  
CITY-ST-ZIP **MIAMI BEACH, FL 33140**

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1031110464451  
14/12/06 80043-606 500.00

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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:

*Walter Steadman, Pres.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*3/27/06 3056748016*  
Date Daytime Phone #

STAPLE CHECK HERE