## **2008 LIMITED PARTNERSHIP ANNUAL REPORT** Due By May 1, 2008 DOCUMENT # A02000000399 1. Entity Name PAULINE AND WALLY, LTD. Principal Place of Business Mailing Address 800 WEST 42ND STREET, APT. 2-A 800 WEST 42ND STREET, APT. 2-A MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140

**FILED** Feb 27, 2008 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE			01202008 No Chg-LP CR2E003 (12/06)	
			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 WRIT	
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.  UDDDDDD34138  Signature, typed or printed name of registered agent and title if applicable.				
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.				
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP COCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GENERAL PARTNER INFORMATION P02000023489 STEADMAN MANAGEMENT CORP. 800 WEST 42ND STREET, APT. 2-A MIAMI BEACH, FL 33140		DO NOT WRITE	<del>-</del>
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				
DOCUMENT # • NAME  STREET ADDRESS  CITY-ST-ZIP				
<ol> <li>14. I hereby of indicated</li> </ol>	certify that the information supplied with this fling does not qualify for the e on this report is true and accurate and that niv signature shall have the san	exemptions contained ne legal effect as if m	I in Chapter 119, Florida Statutes. I further o	certify that the information r of the limited partnership

or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: