6, 18

DOCUMENT # A02000000680

2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILEU SECRETARY-OF STATE-TYISION OF CORPORATIONS

VISIOIE OF LURPORATION |---| 06 MAY - 1 | AM 10: 45_

Principal Place of Business 7198 N.W. 51ST STREET MIAMI, FL 33166 Mailing Address

7198 N.W. 51ST STREET MIAMI, FL 33166



DO NOT WRITE IN THIS SPACE

04242006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 04-3697981 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANTISTEBAN, AIDA 7198 N.W. 51ST STREET MIAMI, FL 33166

DO NOT WRITE IN THIS SPACE

	ve named entity submits this statement for the purpose of changing ations of registered agent.	its registered office or registered	agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE			
	Signature, typed or printed name of registered agent and title if applicable.		DATE
	FILE NOWII! FEE IS \$500.00 After May 1, 2006, Fee will be \$9		
·	A GENERAL PARTNER THAT IS A BUSINESS I NOTE: General Partners MAY NOT be changed or		
12.	GENERAL PARTNER INFORMATION		

12. GENERAL PARTNER INFORMATION

DOCUMENT / P96000099577

NAME 323 INVESTMENTS, INC.

STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166

DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP

DOCUMENT / NAME STREET ADDRESS STREET ADDRESS

800074702998 05/17/06--01007--014 **500.00

DO NOT WRITE IN THIS SPACE

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

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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

tistEGAN

305 4700001

De