2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2006

SIGNATURE

Mar 30, 2006 08:00 AM Secretary of State DOCUMENT # A02000000786 1. Entity Name THE RICH FAMILY LIMITED PARTNERSHIP Principal Place of Business Mailing Address - -248 NE EDGEWATER DRIVE STUART FL 34996 248 NE EDGEWATER DRIVE STUART FL 34996 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E003 (10/05) Apphed For 4. FEI Number Crty & State City & State 01-0702294 Not Applicable \$8.75 Additional Zγp Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SOPKO, JAMES ESQ. Street Address (P.O. Box Number is Not Acceptable) 853 SE MONTEREY COMMONS BLVD. STUART FL 34996 Zip Code City 6. 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 pretted name of registered agent and title if applicable DATE FILE NOW!!! Fee is \$500. *** After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State. 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. GENERAL PARTNER INFORMATION 12. 13. DOCUMENT # P02000044908 STREET ADDRESS NAME RICH FAMILY HOLDINGS INC. STREET ADDRESS 248 NE EDGEWATER DRIVE U000000484413 CITY-ST-ZIP CITY-ST-ZIP STUART FL 34996 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CHY-ST-ZIP CHY-ST- JIP COCUMENT # STREET ADDRESS NAME STREET ADDRESS CICY-ST-7IP CITY-ST-7tP DOCUMENT # STREET ADDRESS MARKE STREET ADDRESS CITY-SI-ZIP CHTY-ST-ZIP 出出 DOCUMENT # STREET ADDRESS NAME CHECK STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREE! ADDRESS NAME STREET ADDRESS CITY-ST-ZIP City-ST-ZIP 14. Thereby 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 partnersh or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

Panald h.R.o.H. 3/28/06

FILED