



2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 APR 24 AM 11:13

DOCUMENT # A02000000850 1. Entity Name RAMARO FAMILY LIMITED PARTNERSHIP					
Principal Place of Business 2482 S.W. 137TH AVENUE MIAMI, FL 33194			Mailing Address 2482 S.W. 137TH AVENUE MIAMI, FL 33194		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		02012006 Chg-LP CR2E003 (11/05)	
Zip		Country		4. FEI Number 46-0491999	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROZENCWAIG & FERRERO-CARR 301 W. HALLANDALE BEACH BLVD. HALLANDALE BEACH, FL 33009				7. Name and Address of New Registered Agent Name <u>ROZENCWAIG, NADEL & FERRERO-CARR</u> Street Address (P.O. Box Number is Not Acceptable) <u>301 WEST HALLANDALE BEACH BLVD.</u> City <u>HALLANDALE BEACH</u> FL <u>33009</u> Zip Code	
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 <u>[Signature]</u> <small>Signature, typed or printed name of registered agent and title if applicable</small>				DATE <u>4/7/06</u>	
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				13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME RMR HOLDINGS, L.C. STREET ADDRESS 2482 S.W. 137TH AVENUE CITY-ST-ZIP MIAMI, FL 33194				STREET ADDRESS CITY-ST-ZIP	
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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: <u>Margarita Rodriguez</u> MARGARITA RODRIGUEZ 4-6-06 305 207 1711 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #</small>					

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