

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 06, 2007 08:00 A
Secretary of State

DOCUMENT # A02000001289

1. Entity Name
COSCAN FLORIDA HOLDINGS, LTD.



Principal Place of Business
**5555 ANGLERS AVENUE
SUITE 1A
FORT LAUDERDALE, FL 33312 US**

Mailing Address
**5555 ANGLERS AVENUE
SUITE 1A
FORT LAUDERDALE, FL 33312 US**



01082007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 14-1849610	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**REGISTERED AGENTS OF FLORIDA, LLC
100 SOUTHEAST SECOND STREET
SUITE 2900
MIAMI, FL 33131**

**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, 2007, Fee will be \$900.00**

U00000634587
04/17/07-80026-002 500.00

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 #	L02000024712
NAME	COSCAN ASSETS, LLC
STREET ADDRESS	5555 ANGLERS AVENUE-SUITE 1
CITY- ST- ZIP	FORT LAUDERDALE, FL 33312

DOCUMENT #	L02000024626
NAME	DEVELOPERS FLORIDA ASSETS LLC
STREET ADDRESS	5555 ANGLERS AVENUE - SUITE 1
CITY- ST- ZIP	FORT LAUDERDALE, FL 33312

DOCUMENT #	
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STREET ADDRESS	
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CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

ALBERT C. PIAZZA

3/13/07

Date

(954) 620-1000

Daytime Phone #

STAPLE CHECK HERE