

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # A02000001297

1. Entity Name
THE CHEN INVESTMENTS LIMITED PARTNERSHIP



Principal Place of Business

**5219 N.W. 79TH WAY
PARKLAND, FL 33067**

Mailing Address

**5219 N.W. 79TH WAY
PARKLAND, FL 33067**

DO NOT WRITE IN THIS SPACE



02062006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
56-2297204

Applied for
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WACHS, JEFFREY S
1177 S.E. 3RD AVENUE
FORT LAUDERDALE, FL 33316**

**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

**1100000455619
03/15/06-80064-021 500.00**

DATE

**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

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP
**CHEN, YIH MIN
5219 N.W. 79TH WAY
PARKLAND, FL 33067**

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP
**CHEN, YING YING
5219 N.W. 79TH WAY
PARKLAND, FL 33067**

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY ST ZIP

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CITY ST ZIP

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STREET ADDRESS
CITY ST ZIP

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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

Date

Daytime Phone #

3/11/06

STAPLE CHECK HERE