2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED **DOCUMENT # A02000001587** 1. Entity Name XHD LTD. 2007 MAR 19 PM 3: 40 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 2295 CORPORATE N.W., #222 2295 CORPORATE N.W., #222 BOCA RATON, FL 33431 BOCA RATON, FL 33431 01092007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 76-0719892 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HERRICK, ELAYNE DO NOT WRITE 2295 N.W. CORPORATE BLVD., STE. 222 BOCA RATON, FL 33431 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 tibe if apolicable FILE NOW!!! FEE IS \$500.00 After May 1, 2007, 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. GENERAL PARTNER INFORMATION 12. P02000127121 **DOCUMENT #** NAME G-P XHD, INC. STREET ADDRESS 2295 N.W. CORPORATE BLVD., STE. 222 CITY-ST-ZIP BOCA RATON, FL 32301 **700094860547** 03/27/07--01033--023 **508.75 DOCUMENT # STREET ADDRESS CITY-S1-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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:

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