
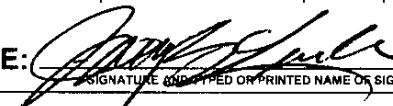


**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**Feb 05, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A02579</b>			
1. Entity Name <b>TAT HING, LTD.</b>			
Principal Place of Business <b>JUNG S LUCK 6197 9TH AVENUE CIRCLE NE BRADENTON, FL 34212</b>		Mailing Address <b>JUNG S LUCK 6197 9TH AVENUE CIRCLE NE BRADENTON, FL 34212</b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc		Suite, Apt. #, etc	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>LUCK, JUNG S 6197 9TH AVENUE CIRCLE NE BRADENTON, FL 34212</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
<b>FILE NOW!!! FEE IS \$500.00</b> <b>After May 1, 2007, Fee will be \$900.00</b>			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	<b>LUCK, JUNG S 6197 9TH AVENUE CIRCLE NE BRADENTON, FL 34212</b>	STREET ADDRESS	<b>U00000621973</b> <b>02/13/07-80006-025 500.00</b>
NAME			
STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP	
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NAME			
STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP	
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: 		FEB 02 2007 941-747-0082	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date Daytime Phone #	

STAPLE CHECK HERE