2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FILED **DOCUMENT # A03000000116** 1. Entity Name NRPÍ VENTURES, LLLP 2007 APR 30 AM 10: 23 SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA ONE SE 3RD AVENUE., SUITE 3100 ONE SE 3RD AVENUE., SUITE 3100 MIAMI, FL 33131 MIAMI, FL 33131 02012007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 74-3081113 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TRACEY, GRANVIL M DO NOT WRITE ONE SE 3RD AVENUE, SUITE 3100 MIAMI, FL 33131 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 ang accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable 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. L03000000800 DOCUMENT # NEW RIVER II GP. LLC NAME STREET ADDRESS ONE SE 3RD AVENUE., SUITE 3100 CITY-ST-ZIP MIAMI, FL 33131 200101974552 05/09/07--01047--013 **500.00 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-7IP IN THIS SPACE DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP n this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership his report as required by Chapter 620, Florida Statutes 14. I hereby certify that the information supplied w or the receiver or trustee empower