


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 02, 2007 08:00 A.
Secretary of State

DOCUMENT # A03000000476 1. Entity Name MIAMI RETAIL HOLDCO, LTD.	
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Principal Place of Business 140 INTRACOASTAL POINTE DRIVE, SUITE 410 JUPITER, FL 33477	Mailing Address 140 INTRACOASTAL POINTE DRIVE, SUITE 410 JUPITER, FL 33477
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DO NOT WRITE IN THIS SPACE



03162007 No Chg-LP	CR2E003 (12/06)
4. FEI Number 03-0511899	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DEG CAPITAL G.P. I INC. 140 INTRACOASTAL POINTE DRIVE, SUITE 410 JUPITER, FL 33477

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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 _____
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.

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F97000005105 DEG CAPITAL G.P. I INC. 140 INTRACOASTAL POINTE DRIVE, SUITE 410 JUPITER, FL 33477
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100000687805
04/10/07-80054-024 500.00

STAPLE CHECK HERE

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: Laurence J. DeGeorge 3/28/07 561-745-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #