


**2008 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2008**

**FILED  
Mar 28, 2008 08:00 AM  
Secretary of State**

<b>DOCUMENT # A03000000476</b>	
1. Entity Name MIAMI RETAIL HOLDCO, LTD.	

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**



01222008 No Chg-LP CR2E003 (12/06)

4. FEI Number 03-0511899	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> 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

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2008, Fee will be \$900.00**

000000873271  
04/10/08-80072-002 500.00

**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 #	F97000005105
NAME	DEG CAPITAL G.P. I INC.
STREET ADDRESS	140 INTRACOASTAL POINTE DRIVE, SUITE 410
CITY-ST-ZIP	JUPITER, FL 33477
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
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CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE 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: Lawrence J. DeGeorge 03-24-08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE