## 2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

## FILED. DOCUMENT # A03000000549 SECRETARY OF STATE DIVISION OF COMPORATIONS MISAL KHAN FAMILY LIMITED PARTNERSHIP 06 JUL 28 AM 9: 22 Principal Place of Business Mailing Address 3808 E. 3RD STREET 3808 E. 3RD STREET PANAMA CITY, FL 32401 PANAMA CITY, FL 32401 03102006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 56-2345971 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KHAN, MISAL DO NOT WRITE 3808 É. 3RD STREET PANAMA CITY, FL 32401 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. 10007846 08/08/06--01026--0 Signature, typed or printed name of registered agent and title it applicable. FILE NOW!!! FEE IS \$500.00 After May 1, 2006, 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 # KHAN, MISAL NAME STREET ADDRESS 3808 E. 3RD STREET CITY-ST-ZIP PANAMA CITY, FL 32401 DCCUMENT / NAME STREET ADDRESS CITY-ST-ZiP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-Z:P IN THIS SPACE DCCUMENT # STREET ADDRESS CITY-ST-ZIP **ECCUMENT** # NAM: STREET ADDRESS CITY-ST-Z:P DOCUMENT # NAME STREET ADDRESS .∄ry-sr-z:e 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 us if made under cath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute his eport as required by Chapter 620, Florida Statutes SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone 4