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

FILED Apr 26, 2007 08:00 AM Secretary of State

DOCUMENT # A0300000093
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1. Entity Name AA MARINA, LLLP



Principal Place of Business

450 EAST LAS OLAS BLVD., STE 1500 FT LAUDERDALE, FL 33301

Mailing Address

450 EAST LAS OLAS BLVD., STE 1500 FT LAUDERDALE, FL 33301



## DO NOT WRITE IN THIS SPACE

01102007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 81-0619911

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC. ONE SOUTHEAST THIRD AVE., STE. 2800 MIAMI, FL 33131

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing its re- tions of registered agent.	gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE .	Signature, lyped or printed name of registered agent and title it applicable.	DATE
	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.0	00
		TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.
12.  DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	GENERAL PARTNER INFORMATION  L02000029656  H MARINA PROPERTIES, LLC  450 EAST LAS OLAS BLVD., STE 1500  FT LAUDERDALE, FL 33301	UD0000735396 05/10/07-80031-024 500.0
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE
DOCUMENT #		

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 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:

STAPLE CHECK HERE

STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

Cris V. Branden

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING GENERAL PARTNER