2007 LIMITED PARTNERSHIP ANNUAL REPORT FILED Due By May 1, 2007 Jan 25, 2007 08:00 A **DOCUMENT # A03000000993 Secretary of State** 1. Entity Name ALAM FAMILY LLLP Mailing Address Principal Place of Business 15020 SOUTHWEST 74TH AVENUE 15020 SOUTHWEST 74TH AVENUE MIAMI, FL 33158-2123 MIAMI, FL 33158-2123 01202007 No Chq-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0083601 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ALAM, NASIR M 15020 SOUTHWEST 74TH AVENUE MIAMI, FL 33158-2123 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 NASIR M. ALAM 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. L03000025110 DOCUMENT # U00000603817 ALAM MANAGEMENT, LLC NAME

STREET ADDRESS 15020 SOUTHWEST 74TH AVENUE MIAMI, FL 331582123 CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

01/29/07-80029-017 500.00

STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME

DOCUMENT & NAME

STREET ADDRESS CITY-ST-ZIP DOCUMENT / MANAG

STREET ADDRESS CITY-ST-ZIP DOCUMENT# STREET ADDRESS CITY - ST- 78P

C-ECK

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:

D TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER