

2007 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2007

**FILED**  
**Jan 19, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A03000001005**

1. Entity Name  
**MANACA INVESTMENT LIMITED PARTNERSHIP**



Principal Place of Business  
**1643 BRICKELL AVE., #4102  
MIAMI, FL 33129**

Mailing Address  
**1643 BRICKELL AVE., #4102  
MIAMI, FL 33129**



01092007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**06-1704860**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**8. Name and Address of Current Registered Agent**

**EL-NAFFY, HANI  
1643 BRICKELL AVE., #4102  
MIAMI, FL 33129**

**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

Signature, typed or printed name of registered agent and title if applicable.

DATE

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 # **P03000075869**  
NAME **MANACA INVESTMENT CORPORATION**  
STREET ADDRESS **1643 BRICKELL AVENUE, #4102**  
CITY-ST-ZIP **MIAMI, FL 33129**

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01/22/07-80049-002 500.00

**DO NOT WRITE  
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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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE