

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

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

DOCUMENT # A03000001039

1. Entity Name
GOWANI FAMILY INVESTMENTS, LTD



Principal Place of Business
**9177 POINT CYPRESS DRIVE
ORLANDO, FL 32819 US**

Mailing Address
**9177 POINT CYPRESS DRIVE
ORLANDO, FL 32819 US**



04122007 No Chg-LP

CR2E003 (12/06)

4. FEI Number
06-1652178

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**GOWANI, YASMEEN
9177 POINT CYPRESS DRIVE
ORLANDO, FL 32836**

**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 # **L02000011396**
NAME **GOWANI INVESTMENTS, L.L.C.**
STREET ADDRESS **7224 STONE ROCK CIRCLE**
CITY-ST-ZIP **ORLANDO, FL 32819**

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000000736068
05/10/07-80061-001 500.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4.23.07

407 760 1780

STAPLE CHECK HERE