


**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006**

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # A03000001627					
1. Entity Name HALBY LIMITED PARTNERSHIP					
Principal Place of Business 3331 SW 58TH ST FT LAUDERDALE FL 33312			Mailing Address 3331 SW 58TH ST FT LAUDERDALE FL 33312		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-0432890	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent HALBERSTAM, DAVID 3331 SW 58 STREET FT LAUDERDALE FL 33312				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and file if applicable.</small>					



1st MOORE CR2E003 (10/05)

\$8.75 Additional Fee Required

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
NAME	HALBERSTAM, DONNA	CITY-ST-ZIP	
STREET ADDRESS	3331 SW 58TH ST		
CITY-ST-ZIP	FT LAUDERDALE FL 33312		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	HALBERSTAM, DAVID	CITY-ST-ZIP	
STREET ADDRESS	3331 SW 58TH ST		
CITY-ST-ZIP	FT LAUDERDALE FL 33312		
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STREET ADDRESS			
CITY-ST-ZIP			

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02/25/06-80017-016 500.00

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:

David Halberstam

2/13/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE