

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Mar 05, 2007 08:00 AM
Secretary of State

DOCUMENT # A03000001678	
1. Entity Name HOUSE OF FIVE DRAGONS, LTD	

Principal Place of Business 610 FOREST DRIVE CASSELBERRY, FL 32707 US	Mailing Address 610 FOREST DRIVE CASSELBERRY, FL 32707 US
---	---

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01032007 Chg-LP CR2E003 (12/06)

4. FEI Number 52-2418817		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CORNELL, RICHARD A 610 FOREST DRIVE CASSELBERRY, FL 32707		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 _____
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.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	CORNELL, RICHARD A	STREET ADDRESS	
NAME	610 FOREST DRIVE	CITY-ST-ZIP	000000056502
STREET ADDRESS	CASSELBERRY, FL 32707		03/14/07-80028-012 500.00
CITY-ST-ZIP			
DOCUMENT #	TSAI, PING-YEH	STREET ADDRESS	
NAME	610 FOREST DRIVE	CITY-ST-ZIP	
STREET ADDRESS	CASSELBERRY, FL 32707		
CITY-ST-ZIP			
DOCUMENT #	TAO, YEDONG	STREET ADDRESS	
NAME	610 FOREST DRIVE	CITY-ST-ZIP	
STREET ADDRESS	CASSELBERRY, FL 32707		
CITY-ST-ZIP			
DOCUMENT #	BOLLET, ROBERT	STREET ADDRESS	
NAME	661 SEMINOLA BLVD.	CITY-ST-ZIP	
STREET ADDRESS	CASSELBERRY, FL 32707		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

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: Richard A. Cornell
2/28/07 407-830-8669
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE