

2008 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2008

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # A04000000139

1. Entity Name

TOURIST PLAZA, LIMITED PARTNERSHIP



Principal Place of Business

7582 WEST SAND LAKE ROAD  
ORLANDO, FL 32819

Mailing Address

7582 WEST SAND LAKE ROAD  
ORLANDO, FL 32819



01082008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

59-3044005

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

**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, 2008, 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 # K74925  
NAME MAALI ENTERPRISES, INC.  
STREET ADDRESS 7582 WEST SAND LAKE ROAD  
CITY-ST-ZIP ORLANDO, FL 32819

DOCUMENT # L03000056131  
NAME AMERICAN TOURIST PLAZA, LLC  
STREET ADDRESS 7500 COMMERCE CENTER DRIVE  
CITY-ST-ZIP ORLANDO, FL 32819

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
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000000823410  
02/20/08-80040-004 500.00

**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:

*Bassel Maali* 2/5/08 407.345.9200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE