

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A04000000619

1. Entity Name
W/B UNIVERSITY SHOPPING CENTER, LTD.



FILED
06 MAY -1 PM 12:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

~~2665 SOUTH BAYSHORE DRIVE, SUITE 1002~~
~~MIAMI, FL 33133~~
~~2121 Ponce de Leon Blvd., #1250~~
~~CORAL GABLES, FL 33134~~

Mailing Address

~~2665 SOUTH BAYSHORE DRIVE, SUITE 1002~~
~~MIAMI, FL 33133~~
~~2121 Ponce de Leon Blvd., #1250~~
~~CORAL GABLES, FL 33134~~



DO NOT WRITE IN THIS SPACE

04262006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
20-1044931

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

STEARNS WEAVER MILLER WEISSLER ALHADEFF &
SITTERSON, P.A.
150 WEST FLAGLER STREET, SUITE 2200
MIAMI, FL 33130

**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, 2006, 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 # L04000026453
NAME W/B UNIVERSITY SHOPPING CENTER GP, LLC
STREET ADDRESS 2665 SOUTH BAYSHORE DRIVE, SUITE 1002
CITY-ST-ZIP MIAMI, FL 33133

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300075017833
05/22/06--01020--014 **500.00

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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:

WARREN P. W. GISER

4/28/06

Date

305-854-7342

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE