


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**May 10, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A04000000990**

1. Entity Name  
**GABOR LIMITED PARTNERSHIP**



Principal Place of Business  
**1111 KANE CONCOURSE, SUITE 504**  
**BAY HARBOR ISLANDS, FL 33154**

Mailing Address  
**1111 KANE CONCOURSE, SUITE 504**  
**BAY HARBOR ISLANDS, FL 33154**



04042006 No Chg-LP CRZE003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-1418918**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**ROZENCWAIG, LESLIE A ESQ.**  
**C/O ROZENCWAIG & FERRERO-CARR**  
**301 WEST HALLANDALE BEACH BLVD.**  
**HALLANDALE BEACH, FL 33009**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**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 #	L04000040835
NAME	GABOR HOLDINGS LLC
STREET ADDRESS	1111 KANE CONCOURSE, SUITE 504
CITY-ST-ZIP	BAY HARBOR ISLANDS, FL 33164
DOCUMENT #	
NAME	
STREET ADDRESS	
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U00000564096  
 05/20/06-80044-006 508.75

**DO NOT WRITE IN THIS SPACE**

STAPLE CHECK HERE

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:  DATE: **4.4.06** DAYTIME PHONE #: **305.805-K**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER