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

SIGNATURE

SIGNACURE AND

YPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daytime Phone #

FILED Apr 14, 2006 08:00 Al Secretary of State DOCUMENT # A04000001026 1. Entity Name KRINSKY INVESTMENTS, LTD. Principal Place of Business Mailing Address 651 OKEECHOBEE BLVD., PENTHOUSE 105 651 OKEECHOBEE BLVD., PENTHOUSE 105 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E003 (10/05) City & State City & State 4. FEI Number Applied For 20-1303797 Not Applicable Ζφ Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KRINSKY, ANDREW H Street Address (P.O. Box Number is Not Acceptable) 651 OKEÉCHOBEE BLVD., PENTHOUSE 105 WEST PALM BEACH FL 33401 City Zip Code 8. The above named only 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 obl SIGNATURE .. FILE NOW!!! Fee is \$500. *** After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State, 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY DOCUMENT A STREET ADDRESS NAME KRINSKY INVESTMENTS MANAGEMENT, LLC STREET ADDRESS 651 OKEECHOBEE BLVD., PENTHOUSE 105 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 DOCUMENT A STREET ADDRESS U00000508960 NAME '20/06 00025 011 500.00 STREET ADDRESS CITY-ST-7/P CITY ST ZIP DUCUMENT # STREET ADDRESS NAAK STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP DOCUMENT A STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 five 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 frustee empty vered contains this report as required by Chapter 620, Florida Statutes