


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY -1 AM 8:47

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

DOCUMENT # A04000001233	
1. Entity Name HUNDRED FIRES, LTD.	

Principal Place of Business 233 S. SEMORAN BOULEVARD ORLANDO, FL 32807	Mailing Address 233 S. SEMORAN BOULEVARD ORLANDO, FL 32807
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2. Principal Place of Business 976 Lake Baldwin Ln Suite, Apt. #, etc. Suite 201 City & State Orlando Florida Zip 32814 Country ORANGE	3. Mailing Address 976 Lake Baldwin Ln Suite, Apt. #, etc. Suite 201 City & State Orlando Florida Zip 32814 Country ORANGE
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04272006 Chg-LP CR2E003 (11/05)

4. FEI Number 20-1416719	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 REY, JOSE A 233 S. SEMORAN BOULEVARD ORLANDO, FL 32807	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 976 Lake Baldwin Ln Suite 201 City Orlando FL Zip Code 32814	
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P04000110293 BED-WAY, INC. 233 S. SEMORAN BOULEVARD ORLANDO, FL 32807	STREET ADDRESS CITY-ST-ZIP	976 Lake Baldwin Ln Suite 201 Orlando FL 32814
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	800075023078 05/22/06-01027-024 **500.00
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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: Jose A Rey **4/27/06** **4072816666**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE