

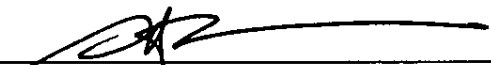


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 06, 2007 08:00 A
Secretary of State

DOCUMENT # A04000001542 1. Entity Name BRENNER INVESTMENT PROPERTIES I, LTD					
Principal Place of Business 1500 W. CYPRESS CREEK ROAD, SUITE 409 FORT LAUDERDALE, FL 33309			Mailing Address 1500 W. CYPRESS CREEK ROAD, SUITE 409 FORT LAUDERDALE, FL 33309		
2. Principal Place of Business - No P.O. Box # 		3. Mailing Address 		 03232007 Chg-LP CR2E003 (12/06)	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State 		City & State 			
Zip 	Country 	Zip 	Country 	4. FEI Number APPLIED FOR	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BRENNER, SCOTT 1500 WEST CYPRESS CREEK ROAD, SUITE 409 FORT LAUDERDALE, FL 33309				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$500.00 After May 1, 2007, 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	L04000070705 BIB-GP, LLC 1500 W CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309		STREET ADDRESS CITY-ST-ZIP	 	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	 		STREET ADDRESS CITY-ST-ZIP	11000000693530 04/16/07-80042-023 508.75	
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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: 			4-3-07 954.596.5555		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytime Phone #</small>		

STAPLE CHECK HERE