2006 LIMITED PARTNERSHIP ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

Due By May 1, 2006

DOCUMENT #A0400001863

BELTWAY COMMERCE CENTER CD93, LTD.



FILED May 01, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

1350 EAST NEWPORT CENTER DRIVE, STE. 206 DEERFIELD BEACH, FL 33442

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04212006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 20-1906748

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KAY, JAMES R ESQ 700 VILLAGE SQUARE CROSSING, STE. 102B PALM BEACH GARDENS, FL 33410

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 The above named entity submits this statement for the purpose of changing its registered the obligations of registered agent. 	office or registered agent, or both, in the State of Florida. I am familiar with, and accept
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 MUS NOTE: General Partners MAY NOT be changed on the form;	

NOTE: General Partners MAY NOT be changed on the	
12.	GENERAL PARTNER INFORMATION
DOCUMENT # NAME SIREET ADDRESS CITY-ST-ZIP	L04000085919 BELTWAY COMMERCE CENTER GP, LLC 1350 EAST NEWPORT CENTER DRIVE, STE. 206 DEERFIELD BEACH, FL 33410
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-SI-ZIP	
DOCUMENT #	

U00000557453 05/17/06-80050-019 508.75

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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:

STREET ADDRESS CITY-ST ZIP DOCUMENT #

CHECK NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS City-St-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Linda G. Kassof

04/27/2006

(954) 428-4585

Date

Dayilme Phone #