

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

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A04000001882**

1. Entity Name  
FLATAUR CD93, LTD.



Principal Place of Business

1350 EAST NEWPORT CENTER DRIVE, SUITE 206  
DEERFIELD BEACH, FL 33442

Mailing Address

1350 EAST NEWPORT CENTER DRIVE, SUITE 206  
DEERFIELD BEACH, FL 33442



04212006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-2736299

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

KAY LAW OFFICES  
% JAMES R. KAY, ESQ.  
700 VILLAGE SQUARE CROSSING, SUITE 102B  
PALM BEACH GARDENS, FL 33410

**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

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 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 # M04000002701  
NAME TAURUS SOUTHERN INVESTMENTS, LLC  
STREET ADDRESS 1350 EAST NEWPORT CENTER DRIVE, SUITE 206  
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

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U000000557452  
05/17/06-80050-018 \$08.75

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Linda G. Kassof

04/27/2006

(954) 428-4585

Date

Daytime Phone #

STAPLE CHECK HERE