


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

2006 APR 21 AM 9:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A05000000188	
1. Entity Name JACA OIL LLLP	

Principal Place of Business 709-336 RIDEAU PLACE SW CALGARY, ALBERTA CANADA T2S1,	Mailing Address PO BOX 1154 DICKINSON, ND 58602
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2. Principal Place of Business 709-3316 Rideau Place SW Suite, Apt. #, etc.	3. Mailing Address 1435 Piedmont Drive E Suite, Apt. #, etc. Suite 202-4
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City & State Calgary, Alberta	City & State Tallahassee, FL
Zip T2S-1Z4	Zip 32308
Country Canada	Country



04072006 Chg-LP CR2E003 (11/05)

4. FEI Number 03-0556304	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ Signature, typed or printed name of registered agent and title if applicable.	DATE _____
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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	F04000002505 AZAD EXPLORATION, INC. 709-336 RIDEAU PLACE SW CALGARY, ALBERTA CANADA T2S1,	STREET ADDRESS CITY-ST-ZIP	709-3316 Rideau Place SW Calgary, Alberta Canada T2S-1Z4
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	500072326015 04/27/06--01021--013 **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: <u>Jamil Azad</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	<u>Jamil Azad, Pres., Azad Exploration, Inc.</u> Date	<u>04/19/06</u> Daytime Phone #
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STAPLE CHECK HERE