2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

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./ Due By May 1, 2006										
DOCU 1. Entity Nam MIKDOT	ne	# A05000000	391				SECRET DIVISION O	ARY OF S F CORPOI	TATE RATIONS 3: 52	
Principal Place of Business 7395 GULF BLVD., SUITE 3 ST. PETE BEACH, FL 33706 Mailing Address 7395 GULF BLVD. ST. PETE BEACH,				SUITE 3 . 33706			IIEI SIHA ARIN PAIN RAIN	. es hi ashi asisa ii	I IAO JURON ITOI ON ROMAN	
Principal Place of Business Mailing Address					· · · · · · · · · · · · · · · · · · ·					
Suite, Apt. #, etc. Suite, Apt. #, etc.					03092006 Chg-LP CR2E003 (11/05)			(11/05)		
City & State City & State						4. FEI Number	228284	40	Applied For Not Applicable	
Zip	Ø Name	Country	Zip	Cour	ntry	5. Certificate of		Fee	.75 Additional Required	
	o. Name	and Address of Current	Registered Agent		7. Name and Address of New Registered Agent Name					
HORAN, MICHAEL J JR 7395 GULF BLVD., SUITE 3 ST. PETE BEACH, FL 33706					Street Address (P.O. Box Number is Not Acceptable)					
					City				FL Zip Code	
The above named entity submits this statement for the purpose of changing its reg the obligations of registered agent.					ed office or registe	red agent, or both,	in the State of Flor	,	liar with, and accept	
SIGNATURE Wind J. H. L. G.P. Michael J. Horan Jr. 3-14-06										
Signature, typed or printed name diagristand agent and title if applicable. DATE FILE NOWI!! FEE IS \$500.00										
After May 1, 2005, 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.										
DOCUMENT #	J08386	INFORMATION	13.	EET ADDRESS		ADDRESS CHA	NGES ONLY			
STREET ADDRESS City-St-Zip	7395 GUL	EALTY, INC. F BLVD., SUITE 3 BEACH, FL 33706		CITY-ST-ZIP				+		
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DOCUMENT # NAME				STRE	EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP					ITY-ST-ZIP					
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 of the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes										
SIGNATURE: No. 127-367-6361 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING GENERAL PARTNER Delto Devictor Proces										