2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS **DOCUMENT # A05000000468** 06 MAR 17 AM 8: 25 SOFRAN BEVERLY HILLS, LTD. Mailing Address Principal Place of Business 818 A1A NORTH, STE 203 818 A1A NORTH, STE 203 PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. 01312006 Cha-LP CR2E003 (11/05) Applied For City & State City & State 4. FEI Number 20-2477813 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROULEAU, ROBERT Street Address (P.O. Box Number is Not Acceptable) 818 A1A NORTH, STE 203 PONTE VEDRA BEACH, FL 32082 Zip Code City FL 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 Signature, typed or printed name of registered agent and title if applicable 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. 13. P00441 DOCUMENT # STREET ADDRESS THE SOFRAN CORPORATION NAME STREET ADDRESS 818 A1A NORTH, STE 203 CITY-ST-7IP CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082 **400069544044** 04/05/06--01038--017 **50 DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # CHECK STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STAPLE (DOCUMENT # STREET ADDRESS NAME STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 the this report as required by Chapter 620, Florida Statutes 14. I hereby certify that the information supplied indicated on this report is true and according the receiver or trustee empowered to February 27, 2006 (904) 280-0008 Rouleau SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone # Date