

# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A05000001017

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** LUCY STREET SHOPS, LTD., LLLP

**Current Principal Place of Business:**

901 PONCE DE LEON BLVD., SUITE 603  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

103 E. LUCY STREET  
FLORIDA CITY, FL 33034

**Current Mailing Address:**

901 PONCE DE LEON BLVD., SUITE 603  
CORAL GABLES, FL 33134

**New Mailing Address:**

9263 SW 136 TER  
MIAMI, FL 33176

**FEI Number:** 20-2946518

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALBORNOZ, WILLIAM H ESQ.  
901 PONCE DE LEON BLVD., SUITE 603  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

OSORNO, JUAN M  
9263 SW 136 TER  
MIAMI, FL 33176 US

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.

SIGNATURE: JUAN M. OSORNO

04/30/2009

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: L05000021861  
Name: LUCY STREET SHOPS, LLC  
Address: 901 PONCE DE LEON BLVD., SUITE 603  
City-St-Zip: CORAL GABLES, FL 33134

**ADDRESS CHANGES ONLY:**

Address: 9263 SW 136 TER  
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JUAN M. OSORNO

MGR

04/30/2009

Electronic Signature of Signing General Partner

Date