

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


**FILED**

**06 MAY -1 PM 4:23**

**SECRETARY OF STATE  
TALLAHASSEE FLORIDA**

**DOCUMENT # A05000001096**

1. Entity Name  
**PATRICIA BETH GOLDSTEIN FAMILY LTD**



Principal Place of Business      Mailing Address  
**19955 NORTHEAST 38TH COURT, UNIT 2604**      **19955 NORTHEAST 38TH COURT, UNIT 2604**  
**AVENTURA, FL 33180**      **AVENTURA, FL 33180**

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04202008    Chg-LP      CR2E003 (11/05)

4. FEI Number  Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**GLASSER, GENE K**  
**C/O ABRAMS ANTON P.A.**  
**2021 TYLER STREET**  
**HOLLYWOOD, FL 33020**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_  
Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
City **FL** Zip Code \_\_\_\_\_

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.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	GOLDSTEIN, PATRICIA BETH 19955 NE 38TH CT., UNIT 2604 AVENTURA, FL 33180	STREET ADDRESS	400075025904 05/22/06--01033--030 **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:** *Patricia Goldstein*      Patricia Goldstein      4/25/06      (305) 607-9919  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER      Date      Design Phone #