

2006 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2006

FILED

06 JUN 19 PM 1:00

SECRETARY OF STATE
TALLAHASSEE FLORIDA



03012006 Chg-LP CR2E003 (11/05)

DOCUMENT # A05000001258	
1. Entity Name TAMPA INDUSTRIAL PARTNERS, <i>LLP LP</i>	



Principal Place of Business 126 SOUTH FEDERAL HIGHWAY, SUITE 201 DANIA BEACH, FL 33004	Mailing Address 126 SOUTH FEDERAL HIGHWAY, SUITE 201 DANIA BEACH, FL 33004
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2. Principal Place of Business <i>None</i>		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number <i>20-1409323</i>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GLASSMAN, PHILLIP 126 SOUTH FEDERAL HIGHWAY, SUITE 201 DANIA BEACH, FL 33004		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 _____ DATE _____
Signature, typed or printed name of registered agent and fee, 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 # NAME STREET ADDRESS CITY - ST - ZIP	P05000008277 HURRICANE ASSET MANAGEMENT CORPORATION 126 SOUTH FEDERAL HIGHWAY, SUITE 201 DANIA BEACH, FL 33004	STREET ADDRESS CITY - ST - ZIP	
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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: *[Signature]* **4/28/06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE