


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

07 FEB -2 AM 10:50

DOCUMENT # A05000001345	
1. Entity Name MILLENNIUM REAL ESTATE HOLDINGS, LLLP	

Principal Place of Business 2500 E. HALLANDALE BEACH BLVD. HALLANDALE BEACH, FL 33009	Mailing Address 2500 E. HALLANDALE BEACH BLVD. HALLANDALE BEACH, FL 33009
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc. PHA	Suite, Apt. #, etc. PHA
City & State	City & State
Zip	Country



01092007 Chg-LP CR2E003 (12/06)

4. FEI Number APPLIED FOR	<input type="checkbox"/> 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 ROZENCWAIG & FERRERO-CARR 301 W. HALLANDALE BEACH BLVD. HALLANDALE BEACH, FL 33009	7. Name and Address of New Registered Agent <table border="1" style="width:100%"> <tr><td>Name</td></tr> <tr><td>Street Address (P.O. Box Number is Not Acceptable)</td></tr> <tr><td>City</td></tr> <tr> <td>FL</td> <td>Zip Code</td> </tr> </table>	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 title if applicable

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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												
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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:  **01/29/2007** **(954)3852550**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE