## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # A05000001528**

1. Entity Name
URBIS & KEY INTERNATIONAL LLLP



FILED
May 06, 2008 08:00 AN
Secretary of State

Principal Place of Business 848 BRICKELL AVENUE SUITE 700 MIAMI, FL 33131 Mailing Address 848 BRICKELL AVENUE SUITE 700 MIAMI, FL 33131



04292008 No Chg-LP

CR2E003 (12/06)

4. FEI Number			Applied For
20-3246613			Not Applicable
5. Certificate of Status Desired	atus Desired		

6. Name and Address of Current Registered Agent

MURAI WALD BIONDO MORENO & BROCHIN, P.A. TWO ALHAMBRA PLAZA PENTHOUSE 1B CORAL GABLES, FL 33134

DO	N	TC	WR	ITE
33 33	31. 3	1 1, 6	13.37 V	15.4
IN	TH	IS S	SPA	CE

<ol><li>The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bot the obligations of registered agent</li></ol>	h, in the State of Florida . I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and little if applicable	DATE

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, 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			
	DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	P04000124071 KEY INTERNATIONAL DEVELOPMENT, INC. 848 BRICKELL AVENUE, SUITE 700 MIAMI, FL 33131			
-	DOCUMENT # NAME - STREET ADDRESS CITY-ST-ZIP	Control of the Contro			
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				
	DOCUMENT # NAME STREET ADDRESS				

DO NOT WRITE
IN THIS SPACE

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:

CITY-ST-ZIP

STAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

41-30-8

Date

Daytime Phone #