


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # A05000001538 1. Entity Name JIAXIANG WU FAMILY LIMITED PARTNERSHIP	
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Principal Place of Business 2406 SW 98 DRIVE GAINESVILLE, FL 32608	Mailing Address 2406 SW 98 DRIVE GAINESVILLE, FL 32608
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DO NOT WRITE IN THIS SPACE



04242007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 75-3197781	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WU, JIAXIANG
996 SW 16TH AVE.
GAINESVILLE, FL 32601**

**DO NOT WRITE
IN THIS SPACE**

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 *Ji Xiang Wu* **JIAXIANG WU** DATE 04/24/07

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	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	WU, JIAXIANG 2406 SW 98 DRIVE GAINESVILLE, FL 32608
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	YANG, BAOZHEN 2406 SW 98 DRIVE GAINESVILLE, FL 32608
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IN THIS SPACE**

000000735249
05/10/07-80025-019 500.00

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: *Ji Xiang Wu* **JIAXIANG WU** 04/24/07 3522156642

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE