2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

or the receiver or trustee empower

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE:

SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # A05000001661 1. Entity Name 06 APR 24 AM 8: 55 FALCON HOUSE, LTD. Principal Place of Business Mailing Address 75 NE 6TH AVENUE **75 NE 6TH AVENUE SUITE 103 SUITE 103** DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04122006 CR2E003 (11/05) Chq-LP 4. FEI Number 20+3375970 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEINSTEIN, NORMAN S Street Address (P.O. Box Number is Not Acceptable) **75 NE 6TH AVENUE SUITE 103** DELRAY BEACH, FL 33483 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, typed or printed name of registered agent and title if applicable DATE 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY P96000025510 DOCUMENT # STREET ADDRESS STATESIDE CAPITAL CORP. NAME STREET ADDRESS 75 NE 6TH AVENUE, SUITE 103 CITY-ST-ZIE 200074079582 05/05/06--01047--014 **\$00.00 CITY-ST-ZIP DELRAY BEACH, FL 33483 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DOCUMENT** # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-71P DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information courate 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 duto execute this report as required by Chapter 620, Florida Statutes 14. I hereby certify that the information s

Norman S. Weinstein, Partner 4/13/06 561-278-9292

Daytime Phone #