## 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Jan 29, 2007 08:00 AM Secretary of State

Due By May 1, 2007				Jan 29, 2007 08:00 A	
	MENT # A050000	01679		Secretary of State	
1. Entity Nan REAL PR	ROPERTY ONE, LTD.				
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4411 BEACO	ce of Business DN CIRCLE, #2C BEACH, FL 33407	Mailing Address 4411 BEACON CIRCLE, # WEST PALM BEACH, FL 3			
, ,			<del>,</del>		
Г	OO NOT WRIT	E IN THIS SE	DACE	01262007 No Chg-LP	CR2E003 (12/06)
	O NOT WINT		ACE	4. FEI Number 20-3390438	Applied For Not Applicable
,	, ,	escales a service de la companya de	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	S8.75 Additional Fee Required
	6. Name and Address of Curn	ant Registered Agent			•
SHOMAR ACCOUNTING, PA 7777 NW 146TH ST				DO NOT W	RITE
MIAMI LAKES, FL 33016				IN THIS SF	
			Section 1881 are	say and the gather than	ACL
		nt for the purpose of changing its re-	gistered office or registe	red agent, or both, in the State of Flo	orida. I am familiar with, and accept
_	tions of registered agent.				
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable.			DATE
	After May 1	OW!!! FEE IS \$500.00 I, 2007, Fee will be \$900.0	00	000000	0611243
	A GENERAL PARTNE	R THAT IS A BUSINESS ENTI	TY MUST BE REGIS	TERED AND ACTIVE WITH TH	eneral partner.
12.		NER INFORMATION		,	
DOCUMENT #	P02000007970		190	and the state of the state of	e e e
NAME STREET ADDRESS	BML GLOBAL, INC.		Burta Esta	in the property of	
CITY-ST-ZIP	4411 BEACON CIRCLE, #2C   WEST PALM BEACH, FL 334	107	Language of the		
DOCUMENT #					
NAME			•		
STREET ADDRESS CITY-ST-ZIP			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	white property of the state of	*
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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:** 

STREET ADDRESS CITY-ST-ZIP

STAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Jan 26, 2007 (561)863-5894