

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A05000001831 1. Entity Name IDB GROUP LIMITED PARTNERSHIP			
Principal Place of Business 14671 BOCAIRE BLVD. BOCA RATON, FL 33487		Mailing Address 14671 BOCAIRE BLVD. BOCA RATON, FL 33487	
2. Principal Place of Business - No P.O. Box # 4671 Bocaire Blvd		3. Mailing Address 4671 Bocaire Blvd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Boca Raton, FL		City & State Boca Raton, FL	
Zip 33487		Zip 33487	
Country		Country	

FILED

2007 APR 30 AM 11:16

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



04252007 Chg-LP CR2E003 (12/06)

4. FEI Number 20-3561169	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent MILLER & O'NEILL ATTORNEYS AT LAW 2300 GLADES AVE., SUITE 400 EAST BOCA RATON, FL 33431	7. Name and Address of New Registered Agent 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

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	
DOCUMENT #	NAME	STREET ADDRESS	4671 Bocaire Blvd
STREET ADDRESS	14671 BOCAIRE BLVD.	CITY-ST-ZIP	Boca Raton, FL 33487
CITY-ST-ZIP	BOCA RATON, FL 33487		
DOCUMENT #	NAME	STREET ADDRESS	200102539022
STREET ADDRESS		CITY-ST-ZIP	05/15/07--01049--003 **500.00
CITY-ST-ZIP			
DOCUMENT #	NAME	STREET ADDRESS	
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CITY-ST-ZIP			
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STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			

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: *Dwight Burke* April 26, 2007 (561) 994-0245

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER