


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
May 01, 2007 08:00 A
Secretary of State

DOCUMENT # A05000001995 1. Entity Name RM AT INDIAN OFFICE, LLLP	
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Principal Place of Business 3325 S UNIVERSITY DRIVE 210 DAVIE, FL 33328 US	Mailing Address 3325 S UNIVERSITY DRIVE 210 DAVIE, FL 33328 US
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04232007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3726039	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

ROSS REALTY INVESTMENTS INC 3325 S UNIVERSITY DRIVE 210 DAVIE, FL 33328
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**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 _____

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

DOCUMENT #	L05000106951
NAME	RM AT INDIAN OFFICE GP, LLC
STREET ADDRESS	3325 S UNIVERSITY DRIVE SUITE 210
CITY-ST-ZIP	DAVIE, FL 33328
DOCUMENT #	
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000752861
05/21/07-80032-024 500.00

**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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

APR 27 2007

Date

Daytime Phone #

STAPLE CHECK HERE