## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

## DOCUMENT # A06000000557

1. Entity Name
BLAIRRIS VENTURES LIMITED PARTNERSHIP



FILED Mar 14, 2008 08:00 A Secretary of State

Principal Place of Business

6499 ENCLAVE WAY Boca raton, FL 33496 Mailing Address

6499 ENCLAVE WAY BOCA RATON, FL 33496



03122008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 20-4745852

Applied For Not Applicable

				5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Current Registered Agent			
BLAIRRIS VENTURES LLC 6499 ENCLAVE WAY BOCA RATON, FL 33496			DO NOT WRITE IN THIS SPACE	
the obligat	named entity submits this statement for the purpose of changing its it ions of registered agent.	registered offic	ce or registe	ered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE -	Signature, typed or printed name of registered agent and title if applicable.			DATE
**************************************	FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900			
5.5.5	A GENERAL PARTNER THAT IS A BUSINESS EN' NOTE: General Partners MAY NOT be changed on the	TITY MUST I ne form: an /	BE REGIS amendme	STERED AND ACTIVE WITH THIS OFFICE.  ant must be filed to change a general partner.
12.	GENERAL PARTNER INFORMATION	T		
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	BLAIRRIS VENTURES, LLC 6499 ENCLAVE WAY BOCA RATON, FL 33496			
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP				U00000858891 04/01/08-80061÷025 500.00
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DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE
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DOCUMENT # NAME	:	,	·	

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:

CITY-ST-ZIP

STAPLE CHECK HERE

MANUTE AND TYPED OR PRINTED NAME OF BIGING GENERAL PARTNER

3/12/08

561 988-0196

Daytime Phone #