

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JUL 18 PM 1:43

DOCUMENT # A06000000814

1. Entity Name
THE HAUSER GROUP L.L.P.



Principal Place of Business
212 NORTH FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33341

Mailing Address
212 NORTH FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33341

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07092007

Chg-LP

CR2E003 (12/06)

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BENNETT, JUSTIN B
212 NORTH FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33341

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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

DATE

FILE NOW!!! FEE IS \$500.00
Due by September 14, 2007

In accordance with s. 607.193(2)(b), F.S.,
the limited partnership did not receive the
prior notice.

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
CITY - ST - ZIP
SOMERA, PETER J JR, ESQ
212 NORTH FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33341

STREET ADDRESS

CITY - ST - ZIP

000106489520
07/20/07--01033--007 ***500.00
BLP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
SILVA, PAUL M ESQ
212 NORTH FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33341

STREET ADDRESS

CITY - ST - ZIP

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STREET ADDRESS

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

7/9/07 9544265553

STAPLE CHECK HERE