2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2007

STAPLE CHECK HERE

			,					
DOCUMENT # A0600000905 1. Entity Name						FILED		
PEREZ INVESTMENTS OF MIAMI, LLLP						2007 MAR 2		
Principal Plac	e of Businos	s	Mailing Address	•			0	
3490 N.W. MIAMI FL 3	125TH STR 33167	EET	3490 N.W. 125TH S' MIAMI FL 33167	3490 N.W. 125TH STREET MIAMI FL 33167		SECRETAR:	Y OF STATE	
Principal Place of Business - No P.O. Box # Mailing Address						65 -038	5257	181 (1919) 191919 11 (1814 7
Suite Apt.		-	Suito, Apt. #, etc.			1st MOORE	CR2E003 (10	
City & Star	lo		City & State			4. FEI Number	357	Applied For Not Applicable
Zip		Country Zip Con		Cour	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required		
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name			
PEREZ, CARL A 3490 N.W. 125TH STREET MIAMI FL 33167					Street Address (P.O. Box Number is Not Acceptable)			
					City		FL 2	(ip 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 CARL A PEREZ 1.23-07 Signature, typed or prired right of applicable. CARL A PEREZ 1.23-07 DATE								
FILE NOW!!! Fee is \$500. *** After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.								
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 CH.		
DOCUMENT # NAME	P0600040514 JCRP, INC.				STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP					-S1-7IP			
DOCUMENT # NAME					EE1 ADDRESS	000095696900 04/03/0701052019 **500.00		
STREET ADDRESS CITY-ST-ZIP					CITY-SI-ZIP			
DOCUMENT # NAMÉ	VIE				STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP					CIFY-SI-ZIP			
DOCUMENT # NAME				SIRI	ET ADDRESS			
STREET ADDRESS CITY+ST+ZIP				CITY	- S1- ZIP	- 		
DOCUMENT # NAME					STREET ADDRESS			
SIATET ADDRESS CITY-SI-ZIP					· SI · ZIP			
DOCUMENT #					STREET ADDRESS			
SIPIET ADDRESS CITY-ST-ZIP					- S1- 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: CALL A PEREZ 3-3-17 305-925-2238 SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER CARL A PEREZ 3-3-17 305-925-2238 Date Designer Proce 4								