## 2007 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A06000001540

35 SPANISH RIVER DR.

OCEAN RIDGE, FL 33435

Address: City-St-Zip:

Entity Name: JB MARKOWITZ LP

FILED Apr 11, 2007 Secretary of State

| Current Principal Place of Business:  |   |                                  | New Principal Place of Business:          |                                       |
|---|---|----------------------------------|---|---------------------------------------|
|   | SH RIVER DR.<br>DGE, FL 3343              | 35                               |   |                                       |
| Current Mailing Address:  |   |                                  | New Mailing Address:                      |                                       |
|   | SH RIVER DR.<br>DGE, FL 3343              | 35                               |   |                                       |
| FEI Number:   | 20-8298229                                | FEI Number Applied For()         | FEI Number Not Applicable ( )             | Certificate of Status Desired ( )     |
| Name and Address of Current Registered Agent:   |   |                                  | Name and Address of New Registered Agent: |                                       |
| 35 SPANIS   | TZ, CHELY<br>6H RIVER DR.<br>DGE, FL 3340 | 35 US                            |   |                                       |
| The above in the State  |   | submits this statement for the p | ourpose of changing its registered        | d office or registered agent, or both |
| SIGNATUR  | RE:                                       |                                  |   |                                       |
|   | Electror                                  | ic Signature of Registered Ag    | ent                                       | Date                                  |
| GENERAL PARTNER INFORMATION:  |   |                                  | ADDRESS CHANGES ONLY:                     |                                       |
| Document #: Name: MARKOWITZ, ALAN Address: 35 SPANISH RIVER DR. City-St-Zip: OCEAN RIDGE, FL 33435 Document #: Name: MARKOWITZ, CHELY |   | Address:<br>City-St-Zip:         |   |                                       |

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: CHELY MARKOWITZ 04/11/2007