

**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2006**

**FILED  
Feb 13, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # A07021</b>			
1. Entity Name <b>SOUTH PACIFIC ENTERPRISES, LIMITED PARTNERSHIP</b>			
Principal Place of Business <b>675 ROYAL PALM BEACH BOULEVARD ROYAL PALM BEACH FL 33411</b>		Mailing Address <b>675 ROYAL PALM BEACH BOULEVARD ROYAL PALM BEACH FL 33411</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
5. Certificate of Status Desired <input type="checkbox"/>		4. FEI Number <b>59-1894668</b>	
		Applied For Not Applicable	
		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>SANTAMARIA, JESS R 255 PONDEROSA COURT ROYAL PALM BEACH FL 33411</b>		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		DATE	
Signature, typed or printed name of registered agent and title if applicable.			



1st MOORE CR2E003 (10/05)


**FILE NOW!!! Fee is \$500. \*\*\* After May 1, 2006, 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 CHANGES ONLY	
DOCUMENT #		STREET ADDRESS	
NAME	<b>SANTAMARIA, JESS R.</b>	CITY-ST-ZIP	
STREET ADDRESS	<b>255 PONDEROSA COURT</b>		
CITY-ST-ZIP	<b>ROYAL PALM BEACH FL 33411</b>		
DOCUMENT #		STREET ADDRESS	<b>000000433375</b>
NAME		CITY-ST-ZIP	<b>02/24/06-80014-021 500.00</b>
STREET ADDRESS			
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STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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:  2/10/06 (561) 793-2351