

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

2005 APR 28 PM 1:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # A14626

1. Entity Name  
RUBIN AUTOMOBILE BOULEVARD LIMITED



Principal Place of Business  
15500 ROOSEVELT BLVD., SUITE 301  
CLEARWATER, FL 33760-3410

Mailing Address  
15500 ROOSEVELT BLVD., SUITE 301  
CLEARWATER, FL 33760-3410



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04202005 Chg-LP CR2E003 (10/03)

4. FEI Number  
65-0835333

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

RUBIN, LESLIE A  
15500 ROOSEVELT BLVD., SUITE 301  
CLEARWATER, FL 33760

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

9. Capital Contributions as Shown on record. \$1,000.00

10. Amount of Capital Contributions in FLORIDA to date.

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 # 436032  
NAME RUBIN DEVELOPMENT CORPORATION  
STREET ADDRESS 15201 ROOSEVELT BLVD., SUITE 112  
CITY-ST-ZIP CLEARWATER, FL 33760

STREET ADDRESS

15500 Roosevelt Blvd Ste 301

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

100054918311  
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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 exemption stated in Section 119.07(3)(i), 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:

*Leslie A Rubin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Leslie A Rubin

4-20-05

727-530-0021

Date

Daytime Phone #

STAPLE CHECK HERE