2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # A17144

1. Entity Name
TAFT PLAZA, LTD.

Principal Place of Business	Mailing Address
6460 TAFT STREET, APT 118 HOLLYWOOD, FL 33024	6460 TAFT STREET, APT 118 HOLLYWOOD, FL 33024

02242006 No Chg-LP CR2E003 (11/05)

4. FEI Number
59-2407984

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GABLE, MICHAEL P.
4000 HOLLYWOOD BLVD
SUITE 735 SOUTH
HOLLYWOOD, FL 33021-6744

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.

U00000448434
03/03/06-80013-022 500.00

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS $500.00
After May 1, 2006, Fee will be $900.00

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*

DOCUMENT #	
NAME	GABLE, DAVID
STREET ADDRESS	6460 TAFT ST., APT 118
CITY-ST-ZIP	HOLLYWOOD, FL 33024
DOCUMENT #	
NAME	GABLE, JANET
STREET ADDRESS	6460 TAFT ST., APT 118
CITY-ST-ZIP	HOLLYWOOD, FL 33024
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
NAME	
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: Mark Gable _____ _____ _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #