

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 14, 2007**

**FILED**  
**May 10, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT #A18118**

1. Entity Name  
**NEW RIVER, LTD./PASCO**



Principal Place of Business  
**2029 CENTURY PARK EAST  
SUITE 2910  
LOS ANGELES, CA 90067**

Mailing Address  
**2029 CENTURY PARK EAST  
SUITE 2910  
LOS ANGELES, CA 90067**



05072007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**59-2509548**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BRUCE LEVINE  
1041 SATINLEAF  
HOLLYWOOD, FL 33019**

**DO NOT WRITE  
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$500.00  
Due by September 14, 2007**

In accordance with s. 607.193(2)(b), F.S.,  
the limited partnership did not receive the  
prior notice.

**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 **FAGGEN, IVAN**  
STREET ADDRESS **2029 CENTURY PARK EAST, SUITE 2910**  
CITY-ST-ZIP **LOS ANGELES, CA 90067**

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U00000763661  
05/30/07-80023-001 500.00

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**5-7-07**

Date

**310-300-0832**

Daytime Phone #

STAPLE CHECK HERE