## 2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR) **DUE BY MAY 1, 2007**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SI

## **FILED** DOCUMENT # A19547 Apr 24, 2007 08:00 AM Secretary of State 1. Entity Name PALM SPRINGS MILE ASSOCIATES, LTD. Principal Place of Business Mailing Address % PHILIPS INTERNATIONAL HOLDING CORP. 295 MADISON AVE, 2ND FLOOR NEW YORK NY 10017 % PHILIPS INTERNATIONAL HOLDING CORP 295 MADISON AVE, 2ND FLOOR NEW YORK NY 10017 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E003 (10/06) Applied For City & State City & State 4. FEi Number 58-1609315 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EISENSTADT, DAVID Street Address (P.O. Box Number is Not Acceptable) 419 WEST 49TH STREET SUITE 300 HIALEAH FL 33012 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, typed or printed name of registered agent and title if applicable. DATE FILE NOW!!! Fee is \$600. \*\*\* After May 1, 2007, 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY 13. DOCUMENT # M00000000829 STREET ADDRESS NAME SL FLORIDA LLC STREET ADDRESS 295 MADISON AVE, 2ND FLOOR CITY-ST-ZIP CHY-SI-7IP NEW YORK NY 10017 000000728489 DOCUMENT # STREET ADDRESS N5/07/07-80019-009 500.00 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-71P DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CHY-ST-7IP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZiP C(TY-ST-7(P 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 eath; 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 eath; 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 eath; 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 eath; 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 eath; 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 eath; 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 eath; 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 eath; that the information indicated on the information indicated on the information indicated on the information indicated on the information indicated in the information ind

Senior Vice President

Philips International Holding Corp.

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