


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

**FILED
Feb 21, 2007 08:00 AM
Secretary of State**

DOCUMENT # A23182
1. Entity Name
17070 COLLINS AVENUE SHOPPING CENTER, LTD.



Principal Place of Business 17100 COLLINS AVE STE 225 SUNNY ISLES BEACH, FL 33160	Mailing Address 17100 COLLINS AVE STE 225 SUNNY ISLES BEACH, FL 33160
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DO NOT WRITE IN THIS SPACE



01052007 No Chg-LP CR2E003 (12/06)

4. FEI Number 59-2721105	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KATZ, RAANAN
17100 COLLINS AVE SUITE 225
SUITE 225
SUNNY ISLES BEACH, FL 33160

**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 _____ U00000642768
Signature, typed or printed name of registered agent and title if applicable. 03/01/07-80057-012 500.00
DATE

**FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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 STREET ADDRESS CITY-ST-ZIP	M37803 17070 COLLINS AVENUE SHOPPING CENTER, INC. 17100 COLLINS AVE #225 SUNNY ISLES BCH, FL
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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: [Signature] 2-13-07 781-320-0001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #