### · 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

#### **DOCUMENT # A24220**

1. Entity Name

PROPERTY TAX CONSULTANTS, LTD.



FILED Mar 19, 2007 08:00 AM Secretary of State

Principal Place of Business
C/O STANLEY H. BECK
656 E. HALLANDALE BEACH BLVD.

Mailing Address C/O STANLEY H. BECK 656 E. HALLANDALE BEACH BLVD. HALLANDALE, FL. 33009





## DO NOT WRITE IN THIS SPACE

03122007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-2772622

Applied For Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BECK, STANLEY H 656 EAST HALLANDALE BEACH BLVD. HALLANDALE, FL 33009

## DO NOT WRITE IN THIS SPACE

SIGNATURE	<ol><li>The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, the obligations of registered agent.</li></ol>	in the State of Florida. I am familiar with, and accept
Signature, typed or printed name of registered agent and little if applicable.	SIGNATURE Signature, typed or printed name of registered agent and little if applicable.	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.

GENERAL PARTNER INFORMATION H32414 DOCUMENT / TRI-COUNTY CONSULTANTS CORP. NAME 656 E. HALLANDALE BEACH BLVD. STREET ADDRESS CITY-ST-ZIP HALLANDALE, FL 33009 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # CHECK NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

03/29/07-80008-025 508.75

# DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling 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:** 

CITY-ST-ZIP

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING GENERAL PARTNE

STANLOY H BECK

3/14/07

4543606

Daytime Prione #