

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Feb 26, 2007 08:00 A
Secretary of State

DOCUMENT # A25013

1. Entity Name
ORGALOGIC LTD.



Principal Place of Business
25 SEABREEZE AVENUE, SUITE 302
DELRAY BEACH, FL 33483

Mailing Address
25 SEABREEZE AVENUE, SUITE 302
DELRAY BEACH, FL 33483



01082007 No Chg-LP

CR2E003 (12/06)

4. FEI Number
65-0081931

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PAULOVITS, IMRE
25 SEABREEZE AVENUE, #302
DELRAY BEACH, FL 33483

**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

J. M. L.
Signature, typed or printed name of registered agent and title if applicable.

CO-CEO

02-22-2007

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 # P41010
NAME ORGALOGIC MANAGEMENT INC
STREET ADDRESS 25 SEABREEZE AVE., #201
CITY-ST-ZIP DELRAY BEACH, FL

DOCUMENT #
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CITY-ST-ZIP

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U00000649512
03/07/07-80052-008 500.00

**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

J. M. L.