## 2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

STAPLE CHECK HERE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

		<u> </u>			_			SWALIONS	
1. Entity Nan	MENT # A28499 RUN PARTNERS, LTD.					06 APR	24 AF	1 9: 11	
Principal Plac	cd of Business	Mailing Address			1				
6954 SW 5TH ST. 455 FAIRWAY DRIVE					a /				
MARGATE, FL 33068 STE, 101									
Wirekari E, T	2 33000	DEERFIELD BEACH, FL 33441			NX				
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2. Principal f	Place of Business	3. Mailing Address			410				
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Suite, Apt	. #, etc.	Suite, Apt. #, etc.	Suite Apt. #, etc.			Charl D	00000	20 (44/05)	
		Suite 301			01162006	Chg-LP	CRZEU	03 (11/05)	
City & Sta	te	City & State			4. FEi Number			Applied For	
		Deerfield	Beau	1.10	59-26497	722		Not Applicable	
Zip	Country	Zip 3.3(1	Country		5. Certificate of	Status Desired		8.75 Additional	
		Zip33441	<u> </u>	<u>LSM</u>	J. Certificate of	Status Desired		ee Required	
-	6Name and Address of Current	Registored Agent			7. Name and A	ddress of New Re	gistered A	gent	
0515051			Na	ne					
SPIEGEL, SAM SSAMCO PROPERTIES, INC.				at Address	(P.O. Boy Number:	is Not Assentable	`		
	VAY DRIVE #301		30	Street Address (P.O. Box Number is Not Acceptable)					
DEERFIEL									
	20 02 (01), 12 00441								
			Cit	<i>'</i>			FL	Zip Code	
8. The above	named entity submits this statement for	the purpose of changing its	registered off	ce or registe	red agent or both	in the State of Flo	rida Lamita	miliar with, and account	
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 a	nd title if annicable			<del></del> .		DATE		
		and the woppercool.			· <del>-</del>		DATE		
	FILE NOW	III FEE IS \$500.00							
After May 1, 2006, Fee will be \$900.00									
}	A GENERAL PARTNER T	HAT IS A BUSINESS ENT	FITY MUST	BE REGIS	TERED AND AC	TIVE WITH THI	S OFFICE	•	
42	NOTE: General Partners MA			amendmer	nt must be filed				
12.	GENERAL PARTNER	INFORMATION	13.			ADDRESS CHA	NGES ONLY	<u> </u>	
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NAME STREET ADDRESS	SPIEGEL, SAM			7.2	is fair	way L	)/Ive		
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14. I hereby	certify that the information supplied with	this fling does not quality to	r the exempti	ons containe	d in Chapter 119, f	Florida Statutes, I	further certi	fy that the information	
14. I hereby certify that the information supplied with the sting 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 titled partnership or the receiver or trustee empowered to except the second of the content of the limited partnership or the receiver or trustee empowered to except the second of the content of the limited partnership or the receiver or trustee empowered to except the second of the content of the limited partnership or the receiver or trustee empowered to except the second of the content of the limited partnership or the receiver or trustee empowered to except the second of the content of the limited partnership or the receiver or trustee empowered to except the second of the limited partnership or the receiver or trustee empowered to except the second of the limited partnership or the receiver or trustee empowered to except the second of the limited partnership or the receiver or trustee empowered to except the second of the limited partnership or the receiver or trustee empowered to except the second of the limited partnership or the receiver or trustee empowered to except the second of the limited partnership or the receiver or trustee empowered to except the second of the limited partnership or the receiver or trustee.									
SIGNATURE: SAM SPIEGEL 4/11/06 954-489-9000									
SIGNAI	SIGNATURE: SIGNATURE SIGNATURE OF SIGNING GENERAL PARTNER Date Date Date Date Date Date Date Date								
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