2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED Apr 28, 2008 08:00 AN Secretary of State

	y may i, 2000	
DOCUMENT # A29266 1. Entity Name JENSEN BEACH LAND COMP		
Principal Place of Business C/O DACAR MANAGEMENT LLC 336 E. DANIA BEACH BLVD. DANIA, FL 33004	Mailing Address C/O DACAR MANAGEMENT LLC 336 E. DANIA BEACH BLVD. DANIA, FL 33004	



DO NOT WRITE IN THIS SPACE		04012008 No Chg-LP CR2E003 (12/06)	
		65-0160084 Not Ap	oplicable
	6. Name and Address of Current Registered Agent	Fee Required	
	GARCIA-JELEZ NIA BEACH BLVD. . 33004	DO NOT WRITE IN THIS SPACE	
8. The above the obligat	named entity submits this statement for the purpose of changing its regions of registered agent.	pstered office or registered agent, or both, in the State of Florida. I am familiar with, and	accept
SIGNATURE	Signature, lyped or printed name of registered agent and title if applicable		
		US/21/98-89121-995 598	. 15
	FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	o ·	
	A GENERAL PARTNER THAT IS A BUSINESS ENTITY	TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.	
12.	GENERAL PARTNER INFORMATION	form; an amendment must be filed to change a general partner.	
DOCUMENT # NAML STREET ADDRESS CITY - ST - ZIP DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	S84303 JENSEN BEACH CORPORATION 336 E. DANIA BCH BLVD. DANIA, FL 33004		
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
DOCUMENT # NAME STREET ADDRESS CITY-SI-ZIP			
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP		· :	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNE

4/21/03

954-927-4885

Date

Daytime Phone #