

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 APR 18 AM 9:23

DOCUMENT # A30234

1. Entity Name
KIRKLAND HOLDING, LTD.



Principal Place of Business
801 BRICKELL AVE. 16TH FLOOR
MIAMI, FL 33131

Mailing Address
801 BRICKELL AVE. 16TH FLOOR
MIAMI, FL 33131



01082008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0413936

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324

**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

Signature, typed or printed name of registered agent and title if applicable

400125265324
04/23/08 01016 026 **1300.00

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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 # L81727
NAME KIRKLAND HOLDINGS, INC.
STREET ADDRESS 801 BRICKELL AVE. 16TH FLOOR
CITY-ST-ZIP MIAMI, FL 33131

DOCUMENT # F93000001994
NAME KIRKLAND HOLDINGS, LTD.
STREET ADDRESS 4 COLUMBUS CENTRE
CITY-ST-ZIP ROAD TOWN, B.V. ISLAN

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

**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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/8/08

Date

(305) 381-8340

Daytime Phone #

STAPLE CHECK HERE

4/21