

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**Apr 27, 2007 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT # A30968</b><br>1. Entity Name<br><b>HASAM REALTY LIMITED PARTNERSHIP</b> |  |
|---|---|

|  |  |
|--|--|
| Principal Place of Business<br><b>PO BOX 551761<br/>FT. LAUDERDALE, FL 33355</b> | Mailing Address<br><b>PO BOX 551761<br/>FT. LAUDERDALE, FL 33355</b> |
|--|--|

**DO NOT WRITE IN THIS SPACE**



04032007 No Chg-LP

CR2E003 (12/06)

|   |  |
|---|--|
| 4. FEI Number<br><b>65-0232375</b>                        | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required                  |

|   |
|---|
| 6. Name and Address of Current Registered Agent<br><br><b>FROST, IRWIN M<br/>1111 BRICKELL AVE., SUITE 2050<br/>MIAMI, FL 33131</b> |
|---|

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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 #                      | <b>Z00324</b>                   |
| NAME                            | <b>FRIEDCO, L.C.</b>            |
| STREET ADDRESS                  | <b>PO BOX 551761</b>            |
| CITY-ST-ZIP                     | <b>FT. LAUDERDALE, FL 33355</b> |
| 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**

U000000739372  
05/14/07-80024-023 500.00

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:**  **4/14/07** **954-927-3080**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

**JACK FRIEDLAND, MANAGING MEMBER**

STAPLE CHECK HERE