2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A32117

1. Entity Name
JDRP 79TH AVE. ASSOCIATES, L.P.,



Principal Place of Business

4710 EISENHOWER BLVD., SUITE C-1 TAMPA, FL 33634

Mailing Address

4710 EISENHOWER BLVD., SUITE C-1 TAMPA, FL 33634

FILED

-06 MAY+1 PM: 1293

SECHEJANY OF STATE



DO NOT WRITE IN THIS SPACE

03132006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 59-3086585

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABRAMS, ALLAN 4710 EISENHOWER BLVD., STE. C-1 TAMPA, FL 33634

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing its re- ions of registered agent.	gistered office or registered agent, or both, i	in the State of Florida. I am familiar with, and accept
SIGNATURE			DATE
	Signature, typed or printed name of registered agent and title if applicable.		DATE
	FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.0	00	
	A GENERAL PARTNER THAT IS A BUSINESS ENTI NOTE: General Partners MAY NOT be changed on the		
12.	GENERAL PARTNER INFORMATION		
DOCUMENT #	P35958		
NAME	79TH AVE. 91 CORP.		
STREET ADDRESS	4710 EISENHOWER BLVD #C-1		
CITY-ST-ZIP	TAMPA, FL 336346334		
DOCUMENT #			
NAME	<u> </u>	91	00074757019
STREET ADDRESS		0S/1 ⁻	7/0601019025 **500.00
CITY-ST-ZIP			
DOCUMENT #			
NAME			
STREET ADDRESS		I DO N	OT WRITE
CITY-ST-ZIP		161	110 ODA OF
DOCUMENT #		IN IF	IIS SPACE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #			
NAME			

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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTHER

3/16/

813-880-8022