


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A32563 1. Entity Name FIRC KEY BISCAVNE, LTD \$500.00	
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Principal Place of Business 2299 DOUGLAS RD., 4TH FLOOR MIAMI, FL 33145	Mailing Address 2299 DOUGLAS RD., 4TH FLOOR MIAMI, FL 33145
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DO NOT WRITE IN THIS SPACE

FILED
06 MAY 10 AM 10:42
FLA

01092006 No Chg-LP CR2E003 (11/05) 06

4. FEI Number 65-0314937	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FIRC MANAGEMENT, INC. 2299 DOUGLAS RD., 4TH FLOOR MIAMI, FL 33145	DO NOT WRITE IN THIS SPACE
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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, 2006, 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 #	651835
NAME	FIRC MANAGEMENT, INC.
STREET ADDRESS	2299 DOUGLAS RD., 4TH FL
CITY-ST-ZIP	MIAMI, FL
DOCUMENT #	
NAME	FRAGA, ANTONIO O.
STREET ADDRESS	2299 DOUGLAS RD., 4TH FL
CITY-ST-ZIP	MIAMI, FL
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

400075286034
05/25/06--01024--015 **750.00

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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:  **4/28/06** **(305) 860-2300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE