

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

**FILED**  
**Mar 15, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A32648**

1. Entity Name  
**MANHATTAN PALMS, LTD.**



Principal Place of Business  
**C/O PROFESSIONAL MANAGEMENT, INC.  
9095 S.W. 87TH AVENUE, SUITE 777  
MIAMI, FL 33176**

Mailing Address  
**C/O PROFESSIONAL MANAGEMENT, INC.  
9095 S.W. 87TH AVENUE, SUITE 777  
MIAMI, FL 33176**



01082007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**59-3160195**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**SHERRY, ALEX  
9095 S.W. 87TH AVENUE, SUITE 777  
MIAMI, FL 33176**

**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

DATE

**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 # **P04000158194**  
NAME **PROFESSIONAL ACQUISITIONS AND CONVERSIONS,**  
STREET ADDRESS **9095 SW 87TH AVE. SUITE 777**  
CITY - ST - ZIP **MIAMI, FL 33176**

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03/27/07-80020-005 500.00

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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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**James R. Mitchell**

**3/14/07**

**305-270-0870**

STAPLE CHECK HERE