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

#### **DOCUMENT # A33233**

1. Entity Name

ALMÁNY INVESTORS, LTD.



FILED Feb 05, 2007 08:00 AM Secretary of State

Principal Place of Business

3711 S.W. 27TH STREET MIAMI, FL 33134 Mailing Address

3711 S.W. 27TH STREET MIAMI, FL 33134



## DO NOT WRITE IN THIS SPACE

01252007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0366918 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILTON, ALEXANDER 3711 S.W. 27TH STREET MIAMI, FL 33134

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	named entity submits this statement for the purpose of changing its retions of registered agent.	stered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
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.	o
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 #	V53067	
NAME	ALMANY GROUP, INC.	

STREET ADDRESS | 3711 S.W. 37TH STREET CITY-ST-ZIP MIAMI, FL DOCUMENT # NAME STREET ADORESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-7IP

000000621815 02/13/07-80001-003 500.00

# 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:

DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP

BIGUNTURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-79-07

205-441 0271

Date

Daytime Phone #