

**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007**

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # A33278 1. Entity Name MTLC INVESTMENT, LTD.	
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Principal Place of Business 103 S. ANCHORAGE DR NORTH PALM BCH FL 33408	Mailing Address 103 S. ANCHORAGE DR NORTH PALM BCH FL 33408
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
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1st MOORE CR2E003 (10/06)

6. Name and Address of Current Registered Agent MOORE, BECKY B. % MOORE & ELLRICH, P.A. 4400 PGA BLVD., SUITE 400 PALM BEACH GARDENS FL 33410	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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. * After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.**

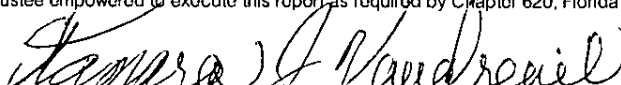
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP	V55819 MTLC MANAGEMENT CORP. 4400 PGA BLVD., STE 400 PALM BCH GARDENS FL	STREET ADDRESS CITY- ST- ZIP	
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05/04/07-80058-020 500.00

STAPLE CHECK HERE

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:  **TAMARA J. VANDREVIL** 4/20/07 461-81-8623
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #