


**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

08 MAY -1 AM 9:20

DOCUMENT # A93000000339	
1. Entity Name EXCEL BIRD, LTD.	

Principal Place of Business 6255 BIRD RD MIAMI, FL 33155	Mailing Address 6255 BIRD RD MIAMI, FL 33155
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2. Principal Place of Business - No P.O. Box # 6361 Sunset Dr Suite, Apt. #, etc.	3. Mailing Address 6361 Sunset Dr Suite, Apt. #, etc.
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City & State Miami, FL Zip 33143	Country	City & State Miami, FL Zip 33143	Country
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04032008 Chg-LP CR2E003 (12/06)

4. FEI Number 65-0401622	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ZULUETA, IGNACIO G 6255 BIRD RD MIAMI, FL 33155	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 _____ Signature, typed or printed name of registered agent and title if applicable	DATE _____
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**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2008, 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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P95000006868 BARGELLO HOLDINGS CORP. 6255 BIRD ROAD MIAMI, FL 33155	STREET ADDRESS CITY-ST-ZIP	6361 Sunset Dr miami, FL 33143
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	300128125553 05/01/08--01055--008 **508.75
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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:** \_\_\_\_\_ *Ignacio G. Zulueta* 4/21/08 305-669-2906  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE