

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 16, 2008 08:00 AM
Secretary of State

DOCUMENT # A93000001100 1. Entity Name HZ INVESTORS LIMITED PARTNERSHIP	
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Principal Place of Business 2999 BRICKELL AVENUE MIAMI, FL 33129	Mailing Address 2999 BRICKELL AVENUE MIAMI, FL 33129
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DO NOT WRITE IN THIS SPACE



03192008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0452563	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 CORPORATION INFORMATION SERVICES, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE _____
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FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	U000000901770 04/29/08-80080-024 500.00
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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 #	P93000059423
NAME	VIZI MANAGEMENT, INC.
STREET ADDRESS	2999 BRICKELL AVENUE
CITY-ST-ZIP	MIAMI, FL 33129
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:  DEAN ZIFF	4-9-08	305-852-0323
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	<small>Date</small>	<small>Daytime Phone #</small>

STAPLE CHECK HERE