2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DO NOT WRITE IN THIS SPACE

DOCUMENT #A93000001361

1. Entity Name STEWART FAMILY LIMITED PARTNERSHIP



FILED Jan 23, 2006 08:00 AM Secretary of State

Principal Place of Business

8510 N.W. 56TH STREET MIAMI, FL 33166

Mailing Address

8510 N.W. 56TH STREET MIAMI, FL 33166



01182006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-0460193

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAW OFFICES OF AINSLEE R. FERDIE 717 PONCE DE LEON BLVD., SUITE 215 CORAL GABLES, FL 33134

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		IN THIS SPACE
	named entity submits this statement for the purpose of changing its regitions of registered agent.	 istered 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	
	FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.0	
		Y MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.
12. DOCUMENT # NAME STREET ADDRESS CHY: ST-ZIP	GENERAL PARTNER INFORMATION P93000079053 8510 CORP. 8510 N.W. 56TH STREET MIAMI, FL 33166	U00000395974 01/27/06-80013-020 500.00
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	miran, 12 corec	01/21/05-60013-320 500.00
DOCUMENT # Name Street address City-St-Zip		DO NOT WRITE
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
DOGUMENT # NAME STREET ADDRESS CHY-ST-ZIP		-
DOCUMENT # NAME STREET ADDRESS		· · · ·

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 cath; 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:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER