

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

**FILED**  
**Jan 11, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # A93000001361**

**1. Entity Name**  
**STEWART FAMILY LIMITED PARTNERSHIP**



**Principal Place of Business**  
8510 N.W. 56TH STREET  
MIAMI, FL 33166

**Mailing Address**  
8510 N.W. 56TH STREET  
MIAMI, FL 33166



01072008 No Chg-LP

CR2E003 (12/06)

**4. FEI Number**  
65-0460193

**Applied For**  
Not Applicable

**5. Certificate of Status Desired** ☐

**\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

**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

**DO NOT WRITE IN THIS SPACE**

**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 fee if applicable.

**DATE**

**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**

**DOCUMENT #** P93000079053  
**NAME** 8510 CORP.  
**STREET ADDRESS** 8510 N.W. 56TH STREET  
**CITY-ST-ZIP** MIAMI, FL 33166

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**DO NOT WRITE IN THIS SPACE**

000000779836  
01/11/08-80052-020 500.00

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

1/2/08 305-592-7990