#### 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

### DOCUMENT # A9400000723

1. Entity Name
WESTBIRD CINEMA, LTD.



FILED Feb 12, 2007 08:00 AM Secretary of State

Principal Place of Business

11401 S.W. 40TH STREET

STE. 370 MIAMI, FL 33165 Mailing Address

11401 S.W. 40TH STREET

STE. 370

MIAMI, FL 33165



## DO NOT WRITE IN THIS SPACE

01302007 No Chg-LP CR2

CR2E003 (12/06)

4. FEI Number 65-0500134

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DANIELS, NICHOLAS M ESQ. ONE SE 3RD AVENUE, SUITE 2400 MIAMI, FL 33131

# 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

DOCUMENT / NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT / NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT / NAME
STREET ADDRESS
STREET ADDRESS
STREET ADDRESS

Signature, typed or printed name of registered agent and title if applicable

DATE

#### FILE NOW!!! FEE IS \$500.00 After May 1, 2007, 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.

|   | NOTE. General Partners MAT NOT be changed on the |                                   |  |
|---|--|-----------------------------------|--|
|   | 12.  | GENERAL PARTNER INFORMATION       |  |
|   | DOCUMENT #                                       | P94000039490                      |  |
|   | NAME   | W.B. PROPERTIES, INC.             |  |
|   | STREET ADDRESS                                   | 11401 S.W. 40TH STREET, SUITE 370 |  |
|   | CITY-ST-ZIP                                      | MIAMI, FL 33165                   |  |
|   | DOCUMENT /                                       |                                   |  |
|   | NAME   |                                   |  |
|   | STREET ADDRESS                                   |                                   |  |
| - | CITY-ST-ZIP                                      |                                   |  |
|   | DOCUMENT #                                       |                                   |  |
| 1 | NAME   | ļ .                               |  |
|   | STREET ADDRESS                                   |                                   |  |
|   | CITY-ST-ZIP                                      |                                   |  |

U00000634352 02/22/07-80006-003 500.00

# DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling 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: 4

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/6/07

34-552-5775

Daytime Phone #