

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAR 28 AM 8:38

DOCUMENT # A94000001314

1. Entity Name
 THE GIUNTA GROUP, LTD.



Principal Place of Business
 4003 E FOWLER
 TAMPA, FL 33617

Mailing Address
 4003 E FOWLER
 TAMPA, FL 33617



2. Principal Place of Business - No P.O. Box #
 655 N. Franklin Street

3. Mailing Address
 655 N. Franklin Street

Suite, Apt. #, etc.
 Suite 2200

Suite, Apt. #, etc.
 Suite 2200

City & State
 Tampa FL

City & State
 Tampa, FL

Zip
 33602

Country
 USA

Zip
 33602

Country
 USA

01162008 Chg-LP CR2E003 (12/06)

4. FEI Number
 59-3269059

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GIUNTA, GRACE G
 576 RIVIERA DRIVE
 TAMPA, FL 33606

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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 # P03000061685
 NAME TRIPLE G ENTERPRISES, INC.
 STREET ADDRESS 4003 E FOWLER AVE
 CITY-ST-ZIP TAMPA, FL 33617

13. ADDRESS CHANGES ONLY

STREET ADDRESS 655 N. Franklin Street, Suite 2200
 CITY-ST-ZIP Tampa, FL 33602

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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STREET ADDRESS
 CITY-ST-ZIP

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:

Richard S. Giunta

March 18, 2008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE