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

## **DOCUMENT # A94000001338**

1. Entity Name

OLIVEYE PARTNERS, LTD.



Principal Place of Business

2255 GLADES ROAD, SUITE 223A BOCA RATON, FL 33431 Mailing Address

2255 GLADES ROAD, SUITE 223A BOCA RATON, FL 33431 FILED Apr 16, 2007 08:00 Al Secretary of State



01112007 No Chg-LP

CR2E003 (12/06)

4. FEI Number		Applied For
22-3368855	 . Г	Not Applicable
5. Certificate of Status Desired	\$8.7	5 Additional

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

O.P.L., INC. 2255 GLADES RD., SUITE 223A BOCA RATON, FL 33431

## DO NOT WRITE IN THIS SPACE

named entity submits this statement for the purpose of changing its re- ons of registered agent.	stered office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
Signature, typed or gripled name of registered agent and title if applicable	DATE		
FILE NOWI!! FEE IS \$500.00			
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.			
GENERAL PARTNER INFORMATION			
P94000072090			
O.P.L., INC.			
2255 GLADES RD., SUITE 223A	U00000709408		
BOCA RATON, FL 33431	04/25/07-80801-014 500.00		
	9 1/ C3/ 01 00001 01 1 3001 00		
	Signature, typed or printed name of registered agent and title II applicable.  FILE NOWIL! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.0  A GENERAL PARTNER THAT IS A BUSINESS ENTIT NOTE: General Partners MAY NOT be changed on the GENERAL PARTNER INFORMATION  P94000072090  O.P.L., INC. 2255 GLADES RD., SUITE 223A		

CITY-ST-ZIP

DOCUMENT #

MAME

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #

NAME
STREET ADDRESS
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STREET ADDRESS

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IN THIS SPACE

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

SIGNATURÉ;

CITY-ST-ZIP

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING BENERAL F

Peer.

4-12-07

Daytime Phone