2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT #A95000000802

1. Entity Name

FRED & ASTRID ALESSI ENTERPRISES, LLLP



Principal Place of Business

Mailing Address

4701 WEST COMANCHE AVENUE TAMPA, FL 33614

4701 WEST COMANCHE AVENUE TAMPA. FL 33614

FILED Apr 10, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

03282007 No Chg-LP

CR2E003 (12/06)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALESSI, ALFRED S 4701 WEST COMANCHE AVENUE TAMPA, FL 33614

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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, 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.

ĺ	12. GENERAL PARTNER INFORMATION			
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	ALESSI, ALFRED S 4701 WEST COMANCHE AVENUE TAMPA, FL 33614		
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	ALESSI, ASTRID 4701 WEST COMANCHE AVENUE TAMPA, FL 33614		
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14. I hereby certify that the information supplied with this furne 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 applyate and that myssignature shall be the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowerption execute this paper as required by Chapter 620, Florida Statutes

SIGNATURE:

TYPEDON PROTES NAME OF SIGNING GENERAL PARTNER

4-6-07

Daytime Pr