

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A95000001345

**FILED**  
**Jan 26, 2009**  
**Secretary of State**

**Entity Name:** LOEB FAMILY INVESTMENTS, LTD.

**Current Principal Place of Business:**

3301 PONCE DE LEON BLVD. #300  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

3301 PONCE DE LEON BLVD. #300  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 65-0643793

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOEB, EDWARD  
3301 PONCE DE LEON BLVD. #300  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: P95000064746  
Name: LOEB INVESTMENTS, INC.  
Address: 3301 PONCE DE LEON BLVD. #300  
City-St-Zip: CORAL GABLES, FL 33134

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: EDWARD LOEB

MR.

01/26/2009

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date