

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR 27 AM 10:41

DOCUMENT # A96000000300

1. Entity Name
ESPLANE MEDICAL CENTER, LTD.



Principal Place of Business
470 BILTMORE WAY, STE. 100
CORAL GABLES, FL 33134

Mailing Address
470 BILTMORE WAY, STE. 100
CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

03152006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
65-0644299

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARCIA, FIRPO
470 BILTMORE WAY, STE. 100
CORAL GABLES, FL 33134

**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

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

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, 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 # P94000085266
NAME GUIDANCE CORPORATION
STREET ADDRESS 470 BILTMORE WAY, STE. 100
CITY-ST-ZIP CORAL GABLES, FL 33134

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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300069920093
04/10/06--01018--002 **500.00

**DO NOT WRITE
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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/10/06 (305) 448-2000

Date

Daytime Phone #

STAPLE CHECK HERE