2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A96000000532

1. Entity Name

ROLLER HOCKEY OF SOUTHEAST FLORIDA, LTD.



FILED
Mar 22, 2006 08:00 A
Secretary of State

Principal Place of Business

2295 CORPORATE BLVD., NW

STE. 222

BOCA RATON, FL: 33431

Mailing Address

2295 CORPORATE BLVD., NW

STE. 222

BOCA RATON, FL 33431



DO NOT WRITE IN THIS SPACE

01182006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-0657565 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THE HERRICK COMPANY, INC. 2295 CORPORATE BLVD., NW STE. 222 BOCA RATON, FL 33431 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

11000000476712

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. (122.3).

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 # NAME STREET ADDRESS CITY-ST-ZIP	P96000024298 RHSEF, INC. 2295 CORPORATE BLVD., NW, STE. 222 BOCA RATON, FL 33431	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		the authorized to Chapter 110. Floride Statutes Liturbus configuration information

4. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I jurise design under state 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 Pariner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

M

Daytime Phone #