## 2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

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STAPLE CHECK

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF

KINING GENERAL PARTNER

## Feb 14, 2006 08:00 AM **DOCUMENT # A96000000867 Secretary of State** HAROLD AND IRIS KATZMAN FAMILY LIMITED PARTNERSHIP Principal Place of Business Mailing Address 21405 N.E. 38TH AVENUE 21405 N.E. 38TH AVENUE AVENTURA, FL 33180, AVENTURA, FL 33180 02082006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0657869 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent KATZMAN, HAROLD G DO NOT WRITE 21405 NE 38TH AVE. AVENTURA, FL 33180 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. U00000434354 02/24/06-80060-009 500.00 Signature, typed or printed name of registered agent and title it applicable FILE NOWIL 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. GENERAL PARTNER INFORMATION 12. DOCUMENT # KATZMAN, HAROLD G STREET ADDRESS 21405 N.E. 38TH AVENUE AVENTURA, FL 33180 CITY-ST-ZIP DOCUMENT F NAME STREET ADDRESS CITY-ST-BP DOCUMENT # DO NOT WRITE STREET ADDRESS CYTY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-S1-218 DOCUMENT & NAME STREET ADDRESS CITY-ST-ZIP DISCHMENT # HAME STREET ADDRESS CITY-S1-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this leport is true and accurate and that my signature shall have the same legal effect as if made under path, that I am a General Partner of the limited partnership or the receiver or trustee ampowered to execute this report as required by Chapter 620, Florida Statutes.

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