2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Mar 20, 2006 08:00 AM Secretary of State **DOCUMENT # A96000001474** PLUMMER FAMILY INVESTMENTS, LTD. Principal Place of Business Mailing Address 3516 DURANGO STREET 3516 DURANGO STREET CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 03022006 Chg-LP CR2E003 (11/05) Applied For City & State City & State 4. FEI Number 65-0693697 Not Applicable Zip Country Country Zio \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Mame PLUMMER, KATHLEEN R Street Address (P.O. Box Number is Not Acceptable) 3516 DURANGO STREET CORAL GABLES, FL 33134 City Zip Code 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 ADDRESS CHANGES ONLY P96000025298 DOCUMENT # STREET ADDRESS PLUMMER INVESTMENTS, INC. HAME STREET ADDRESS 3516 DURANGO STREET City-St-Zip CITY-ST-70P CORAL GABLES, FL 33134 DOCUMENT # STREET ADDRESS NAME 000000475935 04/05/06-80036-022 500.00 STREET ADDRESS CITY-SI-ZIP CITY-ST-27P DOCUMENT / STREET ADDRESS UAME STREET ADDRESS CHY-51-7P City-St-zip DOCUMENT (STREET ADDRESS MALSE STREET ADDRESS CSTY-ST-7/P CITY-ST-ZIP DOCUMENT # STREET ADDRESS CHECK HAME STREET ADORESS CITY-ST-27P CITY-ST-ZIP STAPLE DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 each, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this seport as fedured by Chapter 620, Florida Statutes LATILEEN A. INCOMMENT.

FILED

Даунт в Рікие 4