2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # A96000001632

Entity Name

NCS PARTNERS LTD.



FILED Mar 17, 2008 08:00 A Secretary of State

Principal Place of Business

2826 E. OAKLAND PARK BLVD., #300 FT. LAUDERDALE, FL 33308

Mailing Address

2826 E. OAKLAND PARK BLVD., #300 FT. LAUDERDALE, FL 33308



01032008 No Chg-LP

CR2E003 (12/06)

4. FEI Number	***		Applied For
65-0700539			Not Applicable
5. Certificate of Status Desired		•	5 Additional

6. Name and Address of Current Registered Agent

ROJAS, MARCO A 2826 E. OAKLAND PARK BLVD., #300 FT. LAUDERDALE, FL 33306

DO NOT WRITE

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, 2008, 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	】2011年2月2日 - 1877年 - 1878年 - 1888年 - 1	택하게 19 Ye로 가면실임는 10개 11일 47개 다는 1일부	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P95000067856 COLD STORAGE HOLDINGS, INC. 2826 E. OAKLAND PARK BLVD., #300 FT. LAUDERDALE, FL 33306			
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			U00000862037.	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		DO N	OT WRITE	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			IS SPACE	
DOCUMENT # NAME STREET ADDRESS				

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 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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF BIGNING GENERAL PARTNER

954.564-1928