

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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

06 MAR 27 AM 8:57

**DOCUMENT # A96000001706**

1. Entity Name  
 SCHRAUB FAMILY PARTNERSHIP, LTD.



Principal Place of Business  
 1490 N.E. 101ST STREET  
 MIAMI SHORES, FL 33138

Mailing Address  
 1490 N.E. 101ST STREET  
 MIAMI SHORES, FL 33138

2. Principal Place of Business  
 10 EDGEWATER DRIVE

3. Mailing Address  
 10 EDGEWATER DRIVE

Suite, Apt. #, etc.  
 APT 15D

Suite, Apt. #, etc.  
 APT 15D

City & State  
 CORAL GABLES, FL

City & State  
 CORAL GABLES, FL

Zip Country  
 33133 USA

Zip Country  
 33133 USA

03102006 Chg-LP CR2E003 (11/05)

4. FEI Number  
 65-0700874

Applied For  
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

SCHRAUB, EDGAR D  
 1490 N.E. 101ST STREET  
 MIAMI SHORES, FL 33138

**7. Name and Address of New Registered Agent**

Name  
 SCHRAUB, EDGAR D.  
 Street Address (P.O. Box Number is Not Acceptable)  
 10 EDGEWATER DRIVE  
 APT 15D  
 City  
 CORAL GABLES FL Zip Code  
 33133

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 Edgar D. Schraub  
 Signature, typed or printed name of registered agent and the if applicable.

EDGAR D. SCHRAUB 03/15/06  
 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 #	
NAME	SCHRAUB, SHIRLEY W
STREET ADDRESS	1490 N.E. 101ST STREET
CITY - ST - ZIP	MIAMI SHORES, FL 33138
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**13. ADDRESS CHANGES ONLY**

STREET ADDRESS	10 EDGEWATER DRIVE, APT 15D
CITY - ST - ZIP	CORAL GABLES, FL 33133
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	500069928905
CITY - ST - ZIP	04/10/06--01027--005 **500.00
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
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 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: Shirley W Schraub  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SHIRLEY W SCHRAUB 03/15/06  
 Date Daytime Phone #

STAPLE CHECK HERE

305-669-4734