


**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**Apr 11, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # A96000001881</b> 1. Entity Name INTRAM HOSPITALITY LTD.	
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Principal Place of Business 5728 MAJOR BLVD., STE. 601 ORLANDO, FL 32819	Mailing Address 5728 MAJOR BLVD., STE. 601 ORLANDO, FL 32819
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**DO NOT WRITE IN THIS SPACE**



03212007 No Chg-LP CR2E003 (12/06)

4. FEI Number 59-3340116	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  KHATIB, RASHID A 5728 MAJOR BLVD., STE. 601 ORLANDO, FL 32819
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$500.00</b> <b>After May 1, 2007, Fee will be \$900.00</b>	
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**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 #	P95000049236
NAME	INTRAM HOSPITALITY, INC.
STREET ADDRESS	5728 MAJOR BLVD., STE. 601
CITY-ST-ZIP	ORLANDO, FL 32819
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000699058  
04/19/07-80027-014 500.00

**DO NOT WRITE IN THIS SPACE**

STAPLE CHECK HERE

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

<b>SIGNATURE:</b> 	 3/3/07	407-354-2255
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Daytime Phone #