2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED
Mar 07, 2007 08:00 AM
Secretary of State

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1. Entity Name

THE DAVID FAMILY LIMITED PARTNERSHIP



Principal Place of Business

8280 S.W. 105TH STREET MIAMI, FL 33156

Mailing Address

GELBER & COMPANY 11450 INTERSHANCE CIRCLE NORTH MIRAMAR, FL 33025



DO NOT WRITE IN THIS SPACE

01192007 No Chg-LP CR2E003 (12/06)

4. FEI Number Applied For Status Desired Status Desired Status Desired Applied For Not Applicable Status Desired Fee Required

6. Name and Address of Current Registered Agent

DAVID, GLORIA F 8280 S.W. 105TH STREET MIAMI, FL 33156

DO NOT WRITE IN THIS SPACE

| | named entity submits this statement for the purpose of changing its regions of registered agent. | istered office or registered agent, or both, | in the Siale of Florida Lam familiar with, and accept 0000000658950 03/16/07-80010-009 500.00 | | |
|--|--|--|---|--|--|
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. | | | DATE | | |
| - | FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.0 | | U00000058950 | | |
| A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WELL DIFFER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WELL DIFFERENCE TO STATE OF THE PARTNER OF | | | | | |
| 12. A | (r. , n · r GENERAL PARTNER INFORMATION | , | | | |
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| DOCHMENT 4 | | | | | |

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

STAPLE CHECK HERE

NAME STREET ADDRESS

SNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Davime Phone