

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A96000002412

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** GALUTEN LIMITED PARTNERSHIP

**Current Principal Place of Business:**

2030 SOUTH OCEAN DRIVE, NUMBER 414  
HALLANDALE, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

2030 SOUTH OCEAN DRIVE, NUMBER 414  
HALLANDALE, FL 33009

**New Mailing Address:**

**FEI Number:** 65-0713082

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHWARTZ, JOSEPH L ESQ.  
C/O BOIES, SCHILLER & FLEXNER LLP  
2435 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33020 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

**Document #:**

**Name:** GALUTEN, ALVIN DR.  
**Address:** 2030 SOUTH OCEAN DRIVE, APT. 414  
**City-St-Zip:** HALLANDALE, FL 33009

**ADDRESS CHANGES ONLY:**

**Address:**  
**City-St-Zip:**

**Document #:**

**Name:** ISAACSON, LESLIE  
**Address:** 623 BAMFORD ROAD  
**City-St-Zip:** CHERRY HILL, NJ 08003

**Address:**  
**City-St-Zip:**

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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:** ALVIN GALUTEN

GP

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date