
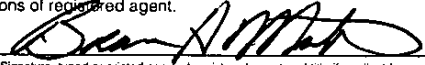
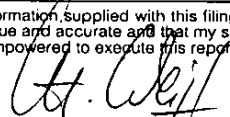


**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 MAY 19 AM 8:21

<b>DOCUMENT # A97000000108</b>					
1. Entity Name WEIGL HOLDINGS, LTD.					
Principal Place of Business 11380 PROSPERITY FARMS ROAD SUITE 215 PALM BEACH GARDENS, FL 33410		Mailing Address 11380 PROSPERITY FARMS ROAD SUITE 215 PALM BEACH GARDENS, FL 33410			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0719210	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
THIEMANN, DIETER A 11380 PROSPERITY FARMS ROAD, #215 PALM BEACH GARDENS, FL 33410				Name Street Address 6400 N. Andrews Ave., Suite 320 Fort Lauderdale, FL 33309 City FL Zip Code	
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 				DATE 4/23/08	
Signature, typed or printed name of registered agent and title if applicable					
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				13. ADDRESS CHANGES ONLY	
DOCUMENT #	P97000002799	STREET ADDRESS			
NAME	WEIGL HOLDINGS (USA), INC.	CITY-ST-ZIP			
STREET ADDRESS	11380 PROSPERITY FARMS ROAD, #215				
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410				
DOCUMENT #		STREET ADDRESS	900129486199		
NAME		CITY-ST-ZIP	05/14/08--01046--003 **500.00		
STREET ADDRESS					
CITY-ST-ZIP					
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NAME		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: 				04/01/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER				Date Daytime Phone #	

STAPLE CHECK HERE