2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A9700000548

1. Entity Name

FUTERNICK FAMILY INVESTMENTS, LTD.



FILED
May 01, 2006 08:00 A
Secretary of State

Principal Place of Business GROVE ISLE DRIVE, #1509 MIAMI, FL 33133 Mailing Address

GROVE ISLE DRIVE, #1509 MIAMI, FL 33133



DO NOT WRITE IN THIS SPACE

03242006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-0732997

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVINSON, EDWARD ESQ. 407 LINCOLN ROAD, PENTHOUSE SOUTHEAST MIAMI BEACH, FL 33139

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The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both the obligations of registered agent.	in the State of Florida, I am familiar with, and accept
SIGNATURE Signature typed or printed name of registered agent and title if applicable.	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 # P97000018078 NAME FUTERNICK INVESTMENTS, INC. STREET ADDRESS GROVE ISLE DRIVE, #1509 CITY-ST-ZIP MIAMI, FL 33133 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY -ST-ZIP DOCUMENT # MAME STREET ADDRESS CITY-ST-ZIP

000000554118 05/15/06-80079-016 500.00

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14. I hereby certify that the information supplied with this filling 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 is required by Chapter 620, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/26/06

305-685-0325

Daytime Phone #