

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 10, 2007 08:00 AM
Secretary of State

DOCUMENT # A97000001052

1. Entity Name
HALPERN PARTNERS, LTD.



Principal Place of Business
**6768 10TH AVENUE NORTH, #301
LAKE WORTH, FL 33467**

Mailing Address
**LEVINE NEIDER WOHL, LLP
230 PARK AVE., STE 462
NEW YORK, NY 10169**

DO NOT WRITE IN THIS SPACE



03222007 No Chg-LP

CR2E003 (12/06)

4. FEI Number
65-0746564

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HALPERN, JACK
6768 10TH AVENUE NORTH, SUITE 301
LAKE WORTH, FL 33467**

**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

Howard M. Halpern
Signature, typed or printed name of registered agent and title if applicable.

4/6/07
DATE

**FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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 #
NAME
STREET ADDRESS
CITY - ST - ZIP
**HALPERN, JACK
6768 10TH AVENUE NORTH, #301
LAKE WORTH, FL 33467**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**HALPERN, HOWARD M
7 NARROWS WAY
JAMESBURG, NJ 08831**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
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04/18/07-80073-012 500.00

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IN THIS SPACE**

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:

Howard M. Halpern
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04/04/07 732 605 1197
Date Daytime Phone #

STAPLE CHECK HERE