2006 LIMITED PARTNÉRSHIP ANNUAL REPORT Due By May 1, 2006 DOCUMENT # A97000001059

FILED Apr 21, 2006: 08:00 AM Secretary of State

1. Entity Nam JANE KL	ng UCZKOWSKI FAMILY INVESTMENT CO., LTD.					
Principal Plac 495 E ALEXA BOCA RATON	ANDER PALM RD 495 E ALEXANDER PALM RD					
DO NOT WRITE IN THIS SPACE			01302006 No Chg-LP			
	Name and Address of Current Registered Agent	-	;			
KLUCZKOWSKI, JANE 495 E ALEXANDER PALM RD BOCA RATON, FL 33432			DO NOT WRITE			
BUCA RA	TON, FL 33432		IN T	HIS SP	ACE	
8. The above the obligat	named entity submits this statement for the purpose of changing its register lions of registered agent.	ed office or registe	red agent, or both,	in the State of Flori	ida. I am famil	iar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and fille if expinishing				DATE	
		· · ·			, oace	<u></u>
	FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	<u> </u>				
	A GENERAL PARTNER THAT IS A BUSINESS ENTITY NOTE: General Partners MAY NOT be changed on the form	fUST BE REGIS n; an amendmei	TERED AND AC nt must be filled t	TIVE WITH THIS to change a ger	S OFFICE. neral partne	<u>.</u>
12.	GENERAL PARTNER INFORMATION				- <u>-</u>	
NAME. STREET ADDRESS CITY - ST-ZIP	KLUCZKOWSKI, JANE O 495 E ALEXANDER PALM RD BOCA RATON, FL 33432		!		ι	
OGCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	BOOK TOTAL COTES			000000: 05/03/06-1	524623 80121-00	14 500.00
DOCUMENT / NAML SINEH ADDINESS CITY-ST-ZIP				OT WR		
UDCUMENT # NAME STREET ADDRESS CALY-SI-ZIP			IN TH	IIS SPA	CE	
DOCUMENT / NAME STREET ADDRESS	· .					_

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 empayered to execute this report as required by Chapter 520, Florida Statutes

SIGNATURE:

STAPLE CHECK HERE

CITY ST-ZIP DOCUMEN) / NAME STREET ADDRESS CITY-ST-ZIP