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2007 MAY 10 AM 10:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2007 LIMITED PARTNERSHIP ANNUAL REPORT**
Due By May 1, 2007

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|--|--|--------------|--|--|--|
| DOCUMENT # A97000001193 | | | |  | |
| 1. Entity Name KENDALL INVESTMENT ASSOCIATES, LTD. | | | | | |
| Principal Place of Business 155 S. MIAMI AVE., SUITE PH-2A MIAMI, FL 33130 | | | Mailing Address 155 S. MIAMI AVE., SUITE PH-2A MIAMI, FL 33130 | | |
| 2. Principal Place of Business - No P.O. Box # 333 South Miami Avenue | | | 3. Mailing Address 333 South Miami Avenue | | |
| Suite, Apt. #, etc. Suite 150 | | | Suite, Apt. #, etc. Suite 150 | | |
| City & State Miami, FL | | | City & State Miami, FL | | |
| Zip 33130 | Country USA | Zip 33130 | Country USA | 4. FEI Number 65-0757581 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent KENDALL PANTHER INC. 155 S. MIAMI AVE., SUITE PH-2A MIAMI, FL 33130 | | | | 7. Name and Address of New Registered Agent Name Kendall Panther, Inc. Street Address (P.O. Box Number is Not Acceptable) 333 S. Miami Avenue Suite 150 City Miami FL Zip Code 33130 | |
| 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | | | | |
| <p align="center">FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00</p> <p align="center">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.</p> | | | | | |
| 12. GENERAL PARTNER INFORMATION | | | 13. ADDRESS CHANGES ONLY | | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | P98000095993 KENDALL PANTHER, INC. 155 S. MIAMI AVE., SUITE PH-2A MIAMI, FL 33130 | | STREET ADDRESS CITY-ST-ZIP | 333 South Miami Ave., Suite 150 Miami, FL 33130 | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | | STREET ADDRESS CITY-ST-ZIP | 600102534756 05/15/07--01045--015 **500.00 | |
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| 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: <u>V.P. KISLAK</u> 4-27-07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone # | | | | | |

STAPLE CHECK HERE