

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Feb 23, 2007 08:00 A
Secretary of State

DOCUMENT # A97000001712 1. Entity Name LEDER BOCA, LTD., A FLORIDA LIMITED PARTNERSHIP	
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Principal Place of Business 6530 W. ROGERS CIRCLE, SUITE 31 BOCA RATON, FL 33487	Mailing Address 6530 W. ROGERS CIRCLE, SUITE 31 BOCA RATON, FL 33487
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DO NOT WRITE IN THIS SPACE



01242007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0786264	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LEDER, SEAN 6530 W. ROGERS CIRCLE, SUITE 31 BOCA RATON, FL 33487
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	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 #	P97000062790
NAME	LEDER BOCA, INC.
STREET ADDRESS	6530 W. ROGERS CIRCLE, SUITE 31
CITY-ST-ZIP	BOCA RATON, FL 33487
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03/06/07-80039-005 500.00

**DO NOT WRITE
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: <u>SEAN M LEDER</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	Date _____ Daytime Phone # <u>561-995-7878</u>

STAPLE CHECK HERE