

2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000001742

FILED
Jan 10, 2006
Secretary of State

Entity Name: QUARTIN LIMITED PARTNERSHIP

Current Principal Place of Business:

7000 N.W. 25TH STREET
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

C/O ADONNA THAYER
2699 S. BAYSHORE DRIVE
MIAMI, FL 33133

New Mailing Address:

FEI Number: 65-0812982 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

QUARTIN, STEPHEN
8980 S.W. 67TH AVENUE
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #:

Name: BERNSTEIN, BARBARA
Address: 3741 PREAKNESS PLACE, APT #1409
City-St-Zip: PALM HARBOR, FL 34684

Document #:

Name: QUARTIN, STEPHEN
Address: 8980 S.W. 67TH AVE.
City-St-Zip: MIAMI, FL 33156

Document #:

Name: QUARTIN, EDYTHE
Address: 2584 INAQUA AVE.
City-St-Zip: COCONUT GROVE, FL 33133

Document #:

Name: FESTINGER, JANET Q
Address: 616 SANTURCE AVE.
City-St-Zip: CORAL GABLES, FL 33143

ADDRESS CHANGES ONLY:

Address: 3583 WIMBLEY WAY #102
City-St-Zip: PALM HARBOR, FL 34685

Address:
City-St-Zip:

Address:
City-St-Zip:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: STEPHEN QUARTIN

GP

01/10/2006

Electronic Signature of Signing General Partner

Date