2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A97000001839

Entity Name

THE KIBLER FAMILY LIMITED PARTNERSHIP

FILED Jan 11, 2006 08:00 AM Secretary of State

Principal Place of Business

13245 SW 74TH AVE MIAMI, FL 33156 Mailing Address

13245 SW 74TH AVE MIAMI, FL 33156



DO NOT WRITE IN THIS SPACE

01032006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-0776782

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BSPA CORPORATE SERVICES % THOMAS WELLS, ESQUIRE 200 S BISCAYNE BLVD, SUITE 1000 MIAMI. FL 33131

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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. 1 am familiar with, and accept the obligations of registered agent.		
SIGNATURE		
Signature, typed or printed name of registered agent and title if applicable,		DATE
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, 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 #	L04000073094	
NAME	KIBLER, LLC.	
STREET ADDRESS	13245 S.W. 74TH AVENUE	
CITY-ST-ZIP	MIAMI, FL 33156	of the following street, and street, and street, and street, and street, and
DOCUMENT #		U0000382621 01/12/06-80021-003 508.75
NAME		0.071E7U6~8UUZ1~UU3 5U8.75
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NAME
STREET ADDRESS

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 520, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

usident

1/3/06

305-233-2594

Daytime Phone #