

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

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

DOCUMENT # A97000001914 1. Entity Name OUT A MIND, LTD.	
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Principal Place of Business 121 ALHAMBRA PLAZA, PH I, SUITE 1600 CORAL GABLES, FL 33134	Mailing Address 121 ALHAMBRA PLAZA, PH I, SUITE 1600 CORAL GABLES, FL 33134
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01062006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0779924	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RENTZ, R. LARRY 121 ALHAMBRA PLAZA, PH I, SUITE 1600 CORAL GABLES, FL 33134
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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 # NAME STREET ADDRESS CITY-ST-ZIP	P97000075376 OUT A MIND, INC. 121 ALHAMBRA PLAZA, PH I, SUITE 1600 CORAL GABLES, FL 33134
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03/04/06-80027-006 500.00

**DO NOT WRITE
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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: [Signature] [Signature] [Signature] 1-27-06 305-443-1000