

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Mar 31, 2008 08:00 AM
Secretary of State

DOCUMENT # A97000002134

1. Entity Name
SOKOLOV, LTD.



Principal Place of Business
**4101 COLLINS AVE.
MIAMI BEACH, FL 33140**

Mailing Address
**4333 COLLINS AVE.
EXECUTIVE OFFICE
MIAMI BEACH, FL 33140**



01212008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0792838	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**TANEN, JEFFREY S
2 S. BISCAYNE BLVD., SUITE 3700
MIAMI, FL 33131**

**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 _____
Signature, typed or printed name of registered agent and title if applicable

**U000000875598
04/11/08-80043-014 500.00**
DATE

**FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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 #	P97000084895
NAME	S.K. GROUP, INC.
STREET ADDRESS	4333 COLLINS AVE.
CITY-ST-ZIP	MIAMI, FL 33140

DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

**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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE