2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

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SECRETARY OF STATE DIVISION OF CORPORATIONS **DOCUMENT # A97000002519** MAZZEO INVESTMENTS, LTD. CLE APR 24 AM II: 15 Principal Place of Business Mailing Address 3360 BAYOU GATE 3360 BAYOU GATE LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 34228 2. Principal Place of Business 184 NOKOMIS CR2E003 (11/05) 64112006 Chg-LP 4. FEI Number Applied For City & State enicel 65-0754773 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MAZZEO, JAMES N 3360 BAYOU GATE LONGBOAT KEY, FL 34228 e nice 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. for SunTrust Ban SIGNATURE Signature, typ 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. GENERAL PARTNER INFORMATION 12. P97000035002 DOCUMENT # STREET ADDRESS NAME JNM CORPORATION STREET ADDRESS 3360 BAYOU GATE CITY-ST-ZIF CITY-ST-ZIP LONGBOAT KEY, FL 34228 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # 500074089875 STREET ADDRESS NAME 05/08/06--01009--009 **500.00 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify the activity that the information supplied with this filting 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 - a SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

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