

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAY -6 AM 8:41

DOCUMENT # A97000002723

1. Entity Name
 WOLFF GROUP, LTD.



| | |
|---|---|
| Principal Place of Business C/O HENRY WOLFF & ASSOCIATES, INC. 200 S.E. 1ST STREET, STE. 600 MIAMI, FL 33131 | Mailing Address C/O HENRY WOLFF & ASSOCIATES, INC. 200 S.E. 1ST STREET, STE. 600 MIAMI, FL 33131 |
|---|---|



| | |
|--|---|
| 2. Principal Place of Business - No P.O. Box # 5500 Collins Ave Suite, Apt. #, etc. Unit 1003 | 3. Mailing Address 5500 Collins Ave. Suite, Apt. #, etc. Unit 1003 |
|--|---|

01182008 Chg-LP CR2E003 (12/06)

| | | | |
|---------------------------------|---------------------------------|-----------------------------|-------------------------------|
| City & State Miami Beach, FL | City & State Miami Beach, FL | 4. FEI Number 65-0817380 | Applied For Not Applicable |
|---------------------------------|---------------------------------|-----------------------------|-------------------------------|

| | | | | |
|--------------|----------------|--------------|----------------|--|
| Zip 33140 | Country USA | Zip 33140 | Country USA | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |
|--------------|----------------|--------------|----------------|--|

| | |
|---|---|
| 6. Name and Address of Current Registered Agent WOLFF, HENRY E JR 200 SE 1ST STREET, SUITE 600 MIAMI, FL 33131 | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 5500 Collins Avenue Unit 1003 City Miami Beach FL Zip Code 33140 |
|---|---|

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, 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 | | 13. ADDRESS CHANGES ONLY | |
|---|--|-------------------------------|---|
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | P97000105106 HENCAR, INC. 200 SE 1ST STREET, STE. 600 MIAMI, FL 33131 | STREET ADDRESS CITY-ST-ZIP | 5500 Collins Avenue, Unit 1003 Miami Beach, FL 33140 |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | STREET ADDRESS CITY-ST-ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | STREET ADDRESS CITY-ST-ZIP | 400128363144 05/05/08--01015--016 **500.00 |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | STREET ADDRESS CITY-ST-ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | STREET ADDRESS CITY-ST-ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | STREET ADDRESS CITY-ST-ZIP | |

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: Henry E Wolff Jr., President, Hencar Inc.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

05/05/2008 305-379-3435
 Date Daytime Phone #

STAPLE CHECK HERE