


**2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006**

**FILED
May 31, 2006 08:00 AM
Secretary of State**

DOCUMENT # A98000000335
1. Entity Name
THE REMIN FAMILY LIMITED PARTNERSHIP



Principal Place of Business Mailing Address
9801 COLLINS AVENUE, #9D 9801 COLLINS AVENUE, #9D
BAL HARBOUR, FL 33154 BAL HARBOUR, FL 33154

DO NOT WRITE IN THIS SPACE



05192006 No Chg-LP CR2E003 (11/05)

4. FEI Number 65-0858134	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REMIN, ROSE
% THE REMIN CORPORATION
9801 COLLINS AVENUE, #9D
BAL HARBOUR, FL 33154

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
Due by September 6, 2006**

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**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 #	P98000005076
NAME	REMIN CORPORATION
STREET ADDRESS	9801 COLLINS AVENUE, #9D
CITY-ST-ZIP	BAL HARBOUR, FL 33154
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

00000566405
05/31/06-80002-004 500.00

DO NOT WRITE IN THIS SPACE

STAPLE CHECK HERE

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: Rose Remin 5/24/06 _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #