


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

**FILED**  
**Jul 14, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # A98000000513 1. Entity Name YEREM, LTD.	
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Principal Place of Business 5405 OKEECHOBEE BLVD., #302-B WEST PALM BEACH, FL 33417	Mailing Address 5405 OKEECHOBEE BLVD., #302-B WEST PALM BEACH, FL 33417
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**DO NOT WRITE IN THIS SPACE**



07032006 No Chg-LP CR2E003 (11/05)

4. FEI Number 65-0816835	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  MEREY, JOHN MD 5405 OKEECHOBEE BLVD., #302-B WEST PALM BEACH, FL 33417
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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**  
**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 # NAME STREET ADDRESS CITY-ST-ZIP	MEREY, JOHN H TRUSTEE 5405 OKEECHOBEE BLVD., #302-B WEST PALM BEACH, FL 33417
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	MEREY, ANDREW G 5405 OKEECHOBEE BLVD., #302-B WEST PALM BEACH, FL 33417
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000000570360  
07/14/06-80012-003 500.00

**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:**  **7-6-06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #