

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**DOCUMENT # A98000000746**

1. Entity Name  
**FLAMINGO COMMERCE CENTER, LTD.**



Principal Place of Business

**12002 MIRAMAR PKWY.  
MIRAMAR, FL 33025**

Mailing Address

**12002 MIRAMAR PKWY.  
MIRAMAR, FL 33025**

FILED

07 JUN 13 AM 9:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04262007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**65-0837099**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**DAVID M. HOWELL  
8941 S.W. 8TH STREET  
PLANTATION, FL 33324**

**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

DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2007, 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 # **P98000026262**  
NAME **FLAMINGO PARK OF COMMERCE, INC.**  
STREET ADDRESS **12002 MIRAMAR PKWY.**  
CITY - ST - ZIP **MIRAMAR, FL 33025**

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**500104434925**  
**06/15/07--01060--015 \*\*500.00**

**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 #

**5/3/07**

STAPLE CHECK HERE