

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A98000000889

1. Entity Name
 SCC, LTD.



Principal Place of Business
 % ATLANTIA HOLDINGS
 645 E. DANIA BEACH BLVD.
 DANIA BEACH, FL 33004

Mailing Address
 % ATLANTIA HOLDINGS
 645 E. DANIA BEACH BLVD.
 DANIA BEACH, FL 33004

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01042007

Chg-LP

CR2E003 (12/06)

4. FEI Number
 65-0826819

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLACKBURN, ACE J JR.
 COONEY, MATTSO, LANCE, BLACKBURN ET AL.
 2312 WILTON DRIVE
 FORT LAUDERDALE, FL 33305

Blackburn, Ace J. Jr.
 645 E. Dania Beach Boulevard
 Dania Beach, FL 33004

Zip Code

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P98000032631
 NAME CASINO CRUZ, INC.
 STREET ADDRESS % ATLANTIA HOLDINGS, 645 E. DANIA BEACH
 CITY-ST-ZIP DANIA BEACH, FL 33004

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

FILED

07 JUN -1 AM 9:42

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



STAPLE CHECK HERE

RA

4/5/07