2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DO NOT WRITE IN THIS SPACE

DOCUMENT # A98000001079

1. Entity Name FLATAUR I, LTD.



Principal Place of Business

1350 E. NEWPORT CENTER, SUITE 206 DEERFIELD BEACH, FL 33442 Mailing Address

P.O. BOX 4219 DEERFIELD BEACH, FL 33442-4219 FILED

2007 APR 30 AM 10: 16

SECRETARY OF STATE TALLAHASSEE, FLORIDA



01042007 No Chg-LP

CR2E003 (12/06)

4. FEt Number 06-1514267

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KAY, JAMES R ESQ. KAY LAW OFFICES 700 VILLAGE SQUARE CROSSING., SUITE 102B PALM BEACH GARDENS, FL 33410

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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, typed or printed name of registered agent and title if applicable.

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.

NOTE: General Partners MAY NOT be changed on the f

12. GENERAL PARTNER INFORMATION

DOCUMENT / P97000069819

TAURUS - FLORIDA OPERATIONS, INC.

SIREET ADDRESS
CITY-SI-ZIP

DOCUMENT / NAME
STREET ADDRESS
CITY-SI-ZIP

TAURUS - FLORIDA OPERATIONS, INC.

1350 E. NEWPORT CENTER, SUITE 206
DEERFIELD BEACH, FL 33442

DOCUMENT / NAME
STREET ADDRESS
CITY-SI-ZIP

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DOCUMENT / NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT / NAME
STREET ADDRESS
STREET ADDRESS

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

417.07

954 478-4585

Davtime Pho