## Due By September 14, 2007

## **2007 LIMITED PARTNERSHIP ANNUAL REPORT FILED** Jun 28, 2007 08:00 Al Secretary of State DOCUMENT # A98000001104 GRANADA SHOPPES ASSOCIATES, LTD.

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DO NOT	WDITE	IN THIS	CDACE

Mailing Address

STE. 800

703 WATERFORD WAY

MIAMI, FL 33126

06202007 No Chg-LP CR2E003 (12/06) 4. FEI Number Applied For 65-0838610 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

PITTS, W. DOUGLAS NOT WRITE 703 WATERFORD WAY HÍŚ SPACE MIAMI, FL 33126

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.

Principal Place of Business

703 WATERFORD WAY

MIAMI, FL 33126

STE. 800

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

6. Name and Address of Current Registered Agent

FILE NOW!!! FEE IS \$500.00 Due by September 14, 2007

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.

١	TO LE COMMITTAL MODELLA POR MARCHINE			
	12. GENERAL PARTNER INFORMATION			
-	DOCUMENT # NAME STREET ADDRESS CITY+ST-ZIP	P96000034735 NEWCASTER DEVCORP, INC. 703 WATERFORD WAY, STE. 800 MIAMI, FL 33126		
	DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P97000105596 OBP 1 CORPORATION 703 WATERFORD WAY, STE. 800 MIAMI, FL 33126		
	DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP			
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U00000766729 06/28/07-80002-013 500.00

DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling 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:

STAPLE CHECK HERE