## 2008 LIMITED PARTNERSHIP ANNUAL REPORT

## **FILED** Jan 22, 2008 08:00 A Secretary of State

Due by may 1, 2006	بموسورة .	
DOCUMENT # A98000001160		
THE UCHIN FAMILY LIMITED PARTNERSHIP		

DO NOT WRITE IN THIS SPACE

Principal Place of Business

**7083 QUEENFERRY CIRCLE** BOCA RATON, FL 33496

Mailing Address

**7083 QUEENFERRY CIRCLE** BOCA RATON, FL 33496



01032008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0835044

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REINSTEIN, JOEL ESQ.

## DO NOT WRITE

	DERAL HIGHWAY, STE 325 TON, FL 33432	IN THIS SPACE	
	named entity submits this statement for the purpose of changi ions of registered agent.	ng its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	DATE	
	FILE NOW!!! FEE IS \$500. After May 1, 2008, Fee will be		
		S ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. on the form; an amendment must be filed to change a general partner.	
12.	GENERAL PARTNER INFORMATION		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P04000075907 UCHIN FAMILY CORP. 7083 QUEENFERRY CIRCLE BOCA RATON, FL 33496		
DOCUMENT # NAME  \$TREET ADDRESS CITY-ST-ZIP		000000791660 01/23/08-80085-007 500.00	
DOCUMENT # NAME STREET ADDRESS CHY-SI-ZIP		DO NOT WRITE	
DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
DOCUMENT # NAMC STREET ADDRESS CITY-ST-ZIP			
DOCUMENT # NAME STREET ADDRESS CITY ST. 219			

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: 2

STAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER