

# 2008 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000001468

**FILED**  
**Apr 06, 2008**  
**Secretary of State**

**Entity Name:** THE LLANES FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

9845 S.W. 40 ST.  
MIAMI, FL 33165

**New Principal Place of Business:**

11880 SW 40 ST  
SUITE 301  
MIAMI, FL 33175

**Current Mailing Address:**

9845 S.W. 40 ST.  
MIAMI, FL 33165

**New Mailing Address:**

11880 SW 40 ST  
SUITE 301  
MIAMI, FL 33175

FEI Number: 65-0988310

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LLANES, FRANKLIN A M.D.  
9845 S.W. 40 ST.  
MIAMI, FL 33165 US

**Name and Address of New Registered Agent:**

LLANES, FRANKLIN A M.D.  
11880 SW 40 ST  
SUITE 301  
MIAMI, FL 33175 US

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.

SIGNATURE:

04/06/2008

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: LLANES, FRANKLIN A  
Address: 9845 S.W. 40 ST.  
City-St-Zip: MIAMI, FL 33165

**ADDRESS CHANGES ONLY:**

Address: 11880 S.W. 40 ST., SUITE 301  
City-St-Zip: MIAMI, FL 33175

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: FRANKLIN A. LLANES

DR.

04/06/2008

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date