


2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAY 22 PM 3:48

DOCUMENT # A98000001879 1. Entity Name BERNSTEIN GROUP, LTD.	
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Principal Place of Business JACK BERNSTEIN 1666 KENNEDY CSWY., STE. #208 NORTH BAY VILLAGE FL 33141	Mailing Address 12 LA GORCE CIRCLE MIAMI BEACH FL 33141-4520
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2. Principal Place of Business - No P.O. Box # 1666 Suite, Apt. #, etc.	3. Mailing Address 1666 Kennedy Cswy #208 City & State N. Bay Village, FL Zip 33141
City & State	Country

1st MOORE CR2E003 (10/07)

4. FEI Number 65-0861460	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BERNSTEIN, JACK 12 LA GORCE CIRCLE MIAMI BEACH FL 33141-4520	
7. Name and Address of New Registered Agent Name Audrey L. Bernstein Street Address (P.O. Box Number is not Acceptable) 1666 Kennedy Cswy #208 City N. Bay Village FL Zip Code 33141	

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 *Audrey L. Bernstein* DATE 4/28/08
 Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! Fee is \$500. * After May 1, 2008, fee will be \$900. *** Make check payable to Florida Department of State.**

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 # NAME STREET ADDRESS CITY-ST-ZIP	P98000068436 JACAUD, INC. 12 LA GORCE CIRCLE MIAMI BEACH FL 33141	STREET ADDRESS CITY-ST-ZIP	300129698353 05/15/08--01045--008 **\$500.00
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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: *Audrey L. Bernstein* DATE 4/28/08
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Filing Phone *

STAPLE CHECK HERE