2006 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2006**

SIGNATURE:

SECRETARY OF STATE DIVISION OF CURPORATIONS **DOCUMENT # A98000002091** 06 MAY -1 AH 9: 39 COMMERCIAL OWNERSHIP LTD. Principal Place of Business Mailing Address 4104 - 20TH STREET WEST 4104 - 20TH STREET WEST BRADENTON, FL 34205 BRADENTON, FL 34205 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04252006 Chg-LP CR2E003 (11/05) Applied For City & State City & State 4. FEI Number 65-0864518 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Gregoria Es GOLDMAN, STANLEY Street Address (P.O. Box Number is Not Acceptable) 4104 - 20TH STREET WEST, APT. 100 BRADENTON, FL 34205 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. 127/06 FILE NOW!!! FEE IS \$500.00 After May 1, 2006, 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. GENERAL PARTNER INFORMATION 12. DOCUMENT # P98000077908 STREET ADDRESS COMMERCIAL OWNERSHIP CORP. NAME 4104 - 20TH STREET WEST, APT. 100 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP BRADENTON, FL 34205 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 400075031194 05/22/06--01045--032 **535.00 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COCUMENT / STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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