

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

**FILED**  
**Mar 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A98000002272**

1. Entity Name  
**THE BEAR ON JOG, LTD.**



Principal Place of Business  
**2295 NW CORPORATE BLVD  
SUITE 138  
BOCA RATON, FL 33431**

Mailing Address  
**2295 NW CORPORATE BLVD  
SUITE 138  
BOCA RATON, FL 33431**



02012006 No Chg-LP

CR2E003 (11/05)

4. FEI Number  
**65-0869621**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**WHITE, DONALD  
2295 NW CORPORATE BLVD  
SUITE 138  
BOCA RATON, FL 33431**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

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

DATE \_\_\_\_\_

**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.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # **P98000084039**  
NAME **THE BEAR ON JOG CORP.**  
STREET ADDRESS **398 NE 6TH AVE.**  
CITY-ST-ZIP **DELRAY BEACH, FL 33483**

DOCUMENT #  
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CITY-ST-ZIP

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000000471460  
03/28/06-80055-008 500.00

**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**3/10/06**

Date

Daytime Phone # \_\_\_\_\_

STAPLE CHECK HERE