2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 25, 2006 08:00 AM
Secretary of State

DOCUMENT # A98000002273

1. *Entity Name*
1035 LINCOLN ROAD, LTD.

1842

Principal Place of Business	Mailing Address
C/O JONATHAN FRYD 523 MICHIGAN AVENUE MIAMI BEACH, FL 33139	C/O JONATHAN FRYD 523 MICHIGAN AVENUE MIAMI BEACH, FL 33139

04242006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0878737
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FRYD, JONATHAN
523 MICHIGAN AVE.
MIAMI BEACH, FL 33139

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

U00000523E20E
06/06/06-80131-006 500.00

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 #	P98000084711
NAME	1035 L.R. CORP.
STREET ADDRESS	523 MICHIGAN AVENUE
CITY-ST-ZIP	MIAMI BEACH, FL 33139
DOCUMENT #	
NAME	
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CITY-ST-ZIP	

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: _____ JONATHAN FRYD 4/24/06 305 673-2941
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #