

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

08 MAR 11 PM 4:40

<b>DOCUMENT #A98000002482</b> 1. Entity Name <b>TWS INVESTMENTS, LTD.</b>					
Principal Place of Business <b>300 S.E. 2ND STREET                  FT. LAUDERDALE, FL 33301</b>			Mailing Address <b>300 S.E. 2ND STREET                  FT. LAUDERDALE, FL 33301</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>65-0872678</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>JONES, PATRICIA                  C/O STILES CORPORATION                  300 S.E. 2ND STREET                  FT. LAUDERDALE, FL 33301</b>				7. Name and Address of New Registered Agent Name <b>Robert Esposito</b> Street Address (P.O. Box Number is Not Acceptable) <b>Stiles Corporation</b> City <b>300 SE 2nd Street                  Fort Lauderdale FL 33301</b>	
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				DATE <b>1/31/08</b>	
<b>FILE NOW!!! FEE IS \$500.00</b> <b>After May 1, 2008, Fee will be \$900.00</b>					
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>P98000089367                  TWS INVESTMENTS, INC.                  300 S.E. 2ND STREET                  FT. LAUDERDALE, FL 33301</b>		STREET ADDRESS CITY-ST-ZIP	<b>000118863060                  02/27/08--01008--005 **500.00</b>	
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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:			Terry W. Stiles January 31, 2008 954-627-9300		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE