


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 7, 2005

DOCUMENT # A99000001406 1. Entity Name ABITBOL FAMILY LIMITED PARTNERSHIP						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 05 SEP -6 AM 9:49	
Principal Place of Business 6955 SW 128 STREET MIAMI, FL 33156				Mailing Address 6955 SW 128 STREET MIAMI, FL 33156			
2. Principal Place of Business 6955 SW. 128 ST Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State MIAMI				City & State			
Zip 33156		Country USA		Zip		Country	
6. Name and Address of Current Registered Agent ABITBOL, ANDRE 6955 SW 128TH STREET MIAMI, FL 33156				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City			
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 <u>Andre Abitbol</u> 8/31/05 <small>Signature, typed or printed name of registered agent and title if applicable</small>				DATE			
9. Capital Contributions as Shown on record. \$392,000.00				10. Amount of Capital Contributions in FLORIDA to date.			
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.							
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			
NAME	ABITBOL, ANDRE			CITY-ST-ZIP			
STREET ADDRESS	6955 SW 128TH STREET			CITY-ST-ZIP			
CITY-ST-ZIP	MIAMI, FL 33156			STREET ADDRESS			
DOCUMENT #	NAME			CITY-ST-ZIP			
NAME	ABITBOL, CAROLYN			STREET ADDRESS			
STREET ADDRESS	6955 SW 128TH STREET			CITY-ST-ZIP			
CITY-ST-ZIP	MIAMI, FL 33156			STREET ADDRESS			
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NAME				STREET ADDRESS			
STREET ADDRESS				CITY-ST-ZIP			
CITY-ST-ZIP				STREET ADDRESS			
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Andre Abitbol</u> ANDRE ABITBOL <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>				Date: <u>7/28/05</u> 305-332-1253 <small>Daytime Phone #</small>			

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