

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**

**Apr 09, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A99000001593**

**1. Entity Name**  
**MICHELLE FAMILY LLLP**



**Principal Place of Business**  
**8672 SW 40TH ST., SUITE 203**  
**MIAMI, FL 33155**

**Mailing Address**  
**8672 SW 40TH ST., SUITE 203**  
**MIAMI, FL 33155**



02082007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number**  
**65-0952332**

**Applied For**  
**Not Applicable**

**5. Certificate of Status Desired** ☐

**\$8.75 Additional**  
**Fee Required**

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

**GUTTENMACHER, EDWARD P**  
**2600 DOUGLAS RD, PH-8**  
**CORAL GABLES, FL 33134**

**DO NOT WRITE**  
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**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, 2007, 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 #** P99000061637  
**NAME** MICHELLE GROUP, INC.  
**STREET ADDRESS** 8672 SW 40TH ST., SUITE 203  
**CITY-ST-ZIP** MIAMI, FL 33155

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04/18/07-80010-008 500.00

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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:** *Frank Lopez* **FRANK LOPEZ DOF MICHELLE GROUP INC. 4/5/07, 305-229-8722**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE