

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR -5 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01192007 Chg-LP CR2E003 (12/06)

DOCUMENT # A99000001799					
1. Entity Name PEARL KAY FAMILY LIMITED PARTNERSHIP					
Principal Place of Business 20191 EAST COUNTRY CLUB DRIVE UNIT 901-TERRACES AVENTURA, FL 33180			Mailing Address C/O GERO & COMPANY 300 S. PINE ISLAND RD., #237 PLANTATION, FL 33324		
2. Principal Place of Business - No P.O. Box # 1700 NW 97 TER			3. Mailing Address Suite, Apt. #, etc.		
City & State PLANTATION, FL			City & State PLANTATION, FL		
Zip 33322		Country USA		4. FEI Number 65-0959705	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent KAY, PEARL 20191 EAST COUNTRY CLUB DRIVE UNIT 901-TERRACES AVENTURA, FL 33180				7. Name and Address of New Registered Agent Name: THOMAS A. GERO Street Address (P.O. Box Number is Not Acceptable): 300 S. PINE ISLAND ROAD SUITE 237 City: PLANTATION FL Zip Code: 33324-2631	
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>Thomas A. Gero</u> DATE: <u>1/22/07</u>					
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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	P04000147479		STREET ADDRESS	1700 NW 97 TERRACE	
NAME	PKAY CORP.		CITY - ST - ZIP	PLANTATION, FL 33322	
STREET ADDRESS	20191 EAST COUNTRY CLUB DRIVE, UNIT 901		STREET ADDRESS		
CITY - ST - ZIP	AVENTURA, FL		CITY - ST - ZIP		
DOCUMENT #			STREET ADDRESS		
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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: <u>Pearl Kay</u> PEARL KAY DATE: <u>954 472-8871</u>					

STAPLE CHECK HERE