2007 LIMITED PARTNERSHIP ANNUAL REPORT FILED **Due By May 1, 2007** Jan 19, 2007 08:00 AM **DOCUMENT # A99000001833 Secretary of State** 1. Entity Name LOUALL 99, LTD. Principal Place of Business Mailing Address 120 MARTINIQUE AVENUE 120 MARTINIQUE AVENUE TAMPA, FL 33606 TAMPA, FL 33606 01162007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 58-2497575 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HINES, JAMES P ESQ. DO NOT WRITE 315 SOUTH HYDE PARK AVE. **TAMPA, FL. 33606** 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, 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. GENERAL PARTNER INFORMATION L05000048284 DOCUMENT # NAME L&LLLC STREET ADDRESS 120 MARTINIQUE AVENUE CITY-ST-78 TAMPA, FL 33606 01/22/07-80049-005 500.00 DOCUMENT & NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT & NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT#

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
Alstie am Jalk Ostruel

NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #

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