

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY -1 AM 8:49

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

DOCUMENT # B02000000123

1. Entity Name
30MINUTE MALL, L.P.



Principal Place of Business
**10275 COLLINS AVE. #1531
BAL HARBOR, FL 33154**

Mailing Address
**20533 BISCAYNE BOULEVARD
SUITE 4-322
MIAMI, FL 33180**



2. Principal Place of Business
20533 BISCAYNE BLVD

3. Mailing Address

Suite, Apt. #, etc.
SUITE 4-322

Suite, Apt. #, etc.

City & State
Miami, FL

City & State

Zip Country
33180 USA

Zip Country

03192006 Chg-LP CR2E003 (11/05)

4. FEI Number
03-0402022

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006, 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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
**NICHOLS, GAIL W
10275 COLLINS AVE. #1531
BAL HARBOR, FL 33154**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**CHERRY, RICHARD S
10275 COLLINS AVE. #1531
BAL HARBOR, FL 33154**

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP
**20533 BISCAYNE BLVD. - SUITE 4-322
Miami, FL 33180**

STREET ADDRESS
CITY-ST-ZIP
**20533 BISCAYNE BLVD. SUITE 4-322
Miami, FL 33180**

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

**200075013962
05/22/06--01011--007 **500.00**

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:

GAIL NICHOLS

4/21/2006

305-936-0223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE