

# 2008 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B03000000396

**FILED**  
**Jan 15, 2008**  
**Secretary of State**

**Entity Name:** MIKSAB LIMITED PARTNERSHIP

**Current Principal Place of Business:**

2203 E. MICHIGAN ST.  
ORLANDO, FL 32806

**New Principal Place of Business:**

**Current Mailing Address:**

2203 E. MICHIGAN ST.  
ORLANDO, FL 32806

**New Mailing Address:**

**FEI Number:** 59-3617194

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SWEETWATER LAW OFFICES PLC  
900 FOX VALLEY DRIVE, SUITE 102  
LONGWOOD, FL 32779 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #: G03269900001  
Name: MIKSAB MANAGEMENT TRUST DATED 11/19/99  
Address: 10125 BAYARD CT.  
City-St-Zip: ORLANDO, FL 32836

**ADDRESS CHANGES ONLY:**

Address: 9688 KILGORE RD.  
City-St-Zip: ORLANDO, FL 32836

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MICHAEL P DIMAURO DDS

DR

01/15/2008

\_\_\_\_\_ Electronic Signature of Signing General Partner

\_\_\_\_\_ Date