## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# B05000000064

City-St-Zip:

BOCA RATON, FL 33487

Entity Name: DJS REAL ESTATE INVESTMENTS, L.P.

FILED Apr 14, 2006 Secretary of State

| Current Principal Place of Business:          |                                   |                                | New Principal Place of Business:          |                                       |
|---|-----------------------------------|--------------------------------|---|---------------------------------------|
|   | DERAL HWY<br>ON, FL 33487         |                                |   |                                       |
| Current Mailing Address:                      |                                   |                                | New Mailing Address:                      |                                       |
|   | DERAL HWY<br>ON, FL 33487         |                                |   |                                       |
| FEI Number:                                   |                                   | FEI Number Applied For (X)     | FEI Number Not Applicable ( )             | Certificate of Status Desired ( )     |
| Name and Address of Current Registered Agent: |                                   |                                | Name and Address of New Registered Agent: |                                       |
|   | LISA<br>DERAL HWY<br>ON, FL 33487 | US                             |   |                                       |
| The above in the State                        |                                   | bmits this statement for the p | ourpose of changing its registered        | d office or registered agent, or both |
| SIGNATUR                                      | RE:                               |                                |   |                                       |
|   | Electronic                        | Signature of Registered Age    | ent                                       | Date                                  |
| GENERAL PARTNER INFORMATION:                  |                                   |                                | ADDRESS CHANGES ONL                       | <b>Y</b> :                            |
| Document #:<br>Name:<br>Address:              | GALANO, LISA<br>6349 N FEDERAI    | _ HWY                          | Address:                                  |                                       |

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LISA GALANO GP 04/14/2006