


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 12, 2008

FILED

08 JUL 18 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # B07000000313			
1. Entity Name FARUQI & FARUQI, LLLP			
Principal Place of Business 3595 SHERIDAN ST STE 206 HOLLYWOOD, FL 33021		Mailing Address 3595 SHERIDAN ST STE 206 HOLLYWOOD, FL 33021	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent KOMLOSSY, EMILY C 3595 SHERIDAN ST STE 206 HOLLYWOOD, FL 33021		7. Name and Address of New Registered Agent 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 _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable			
FILE NOW!!! FEE IS \$500.00 Due by September 12, 2008		In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.	
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 #	NAME	STREET ADDRESS	
STREET ADDRESS	369 LEXINGTON AVE - 10TH FLOOR	CITY - ST - ZIP	400132972924
CITY - ST - ZIP	NEW YORK, NY 10017		07/16/08--01003--006 **500.00
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	FARUQI, LUBNA	CITY - ST - ZIP	
CITY - ST - ZIP	369 LEXINGTON AVE - 10TH FLOOR		
	NEW YORK, NY 10017		
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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>C. P. Faruqi</u>		Date: <u>7/8/08</u>	Daytime Phone #: <u>212-983-9330</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			

STAPLE CHECK HERE