## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

PUBLICATIONS

TERES1

SIGNATURE:

INC.

TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Robert Davis, VP

## May 02, 2008 08:00 AN Secretary of State **DOCUMENT # B07000000356** 1. Entity Name VT EXPO ASSETS, LP Principal Place of Business Mailing Address 2400 LAGUNA DRIVE 2400 LAGUNA DRIVE FT. LAUDERDALE, FL 33316 FT. LAUDERDALE, FL 33316 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04142008 CR2E003 (12/06) Chg-LP Applied For 4. FEI Number City & State City & State 26-1437380 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TERESI, JOSEPH Street Address (P.O. Box Number is Not Acceptable) 2400 LAGUNA DRIVE. FT. LAUDERDALE, FL 38316 City 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, 2008, 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 ADDRESS CHANGES ONLY 12. F07000005876 DOCUMENT # STREET ADDRESS NAME TERESI PUBLICATIONS, INC. 2400 LAGUNA DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE, FL 33316 DOCUMENT # STREET ADDRESS NAME <del>U00000943493</del> STREET ADDRESS 05/29/08-80062-007 500.00 CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCHMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 sugnature 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

**FILED** 

(818) 889-8740