2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # B98000000042

1. Entity Name

SOUTHERN MANAGEMENT & DEVELOPMENT, L.P.



FILED Feb 26, 2007 08:00 A Secretary of State

Principal Place of Business

925 SOUTH FEDERAL HWY SUITE 425

BOCA RATON, FL 33432

Mailing Address

925 SOUTH FEDERAL HWY SUITE 425

BOCA RATON, FL 33432



DO NOT WRITE IN THIS SPACE

02062007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0823985

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVIN, STEVEN 21301 POWERLINE ROAD BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE

		IN THIS SPACE
8. The above the obligat	named entity submits this statement for the purpose of changing its tions of registered age	registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of regisfered agent and this if applicable,	Ø//7/6// o∧te
	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$90	D.00
		ITITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. he form; an amendment must be filed to change a general partner.
12.	GENERAL PARTNER INFORMATION	
DOCUMENT #	F9800000318	
NAME STREET ADDRESS	SSL GP CORP.	
CITY-ST-ZIP	925 SOUTH FEDERAL HWY SUITE 425 BOCA RATON, FL 33432	with the second of the second of the second of the
DOCUMENT #	50077077077,7 2 00402	
NAME		
STREET ADDRESS CITY-ST-ZIP		U00000647923 03/06/07-80091-023 500.00
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NAME STREET ADDRESS		
CITY-ST-ZIP	,	· *

14. I hereby certify that the information supplied with this filling 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 accordate 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:

DOCUMENT #

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT A
NAME
STREET ADDRESS
CITY-ST-ZIP

Steven Levin, President 2/14/7 (561) 948-7100

ATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNERS ON (O)

Daytime Phone #