

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006. . .

DOCUMENT # B99000000195

1. Entity Name
PETROLEUM REALTY INVESTMENT PARTNERS, L.P.



Principal Place of Business
**801 ARTHUR GODFREY RD
MIAMI BEACH, FL 33140**

Mailing Address
**801 ARTHUR GODFREY RD
MIAMI BEACH, FL 33140**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY -1 AM 9:38

DO NOT WRITE IN THIS SPACE

01052006 No Chg-LP CR2E003 (11/05)

4. FEI Number
31-1643295

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

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, 2006, 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.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **F99000002530**
NAME **PETROLEUM REALTY CORPORATION**
STREET ADDRESS **801 ARTHUR GODFREY ROAD**
CITY-ST-ZIP **MIAMI BEACH, FL 33140**

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700075288657
05/25/06--01024--029 **650.00

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE