


**2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 12, 2008**

**FILED
Aug 20, 2008 08:00 AM
Secretary of State**

DOCUMENT # B99000000413		
1. Entity Name BUENA VISTA SHORES, LP		

Principal Place of Business 969 HILLSBORO MILE HILLSBORO BEACH, FL 33062	Mailing Address 969 HILLSBORO MILE HILLSBORO BEACH, FL 33062
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DO NOT WRITE IN THIS SPACE



08122008 No Chg-LP CR2E003 (12/06)

4. FEI Number 65-0960430	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DINER, JESSE ONE FINANCIAL PLAZA SUITE 1400 FORT LAUDERDALE, FL 33394

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 _____ 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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F99000005908 BUENA VISTA SHORES, INC. 969 HILLSBORO MILE HILLSBORO BEACH, FL 33062
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08/20/08-800015-001 500:00

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STAPLE CHECK HERE

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: *Rachel Holden* **RACHEL HOLDEN** 8-13-08 8544867137
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #