2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000016011

MIAMI FUNDS PARTNERS, LLC

FILED May 04, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1784 WEST AVE

STE BAY 4 MIAMI BEACH, FL 33139

1784 WEST AVE STE BAY 4

MIAMI BEACH, FL 33139 US



01062006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1139061 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VIVIES, PATRICK 700 E. DANIA BEACH BLVD., SUITE 202

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DANIA, FL 33004		IN THIS SPACE		
	e named entity submits this statement for the purpose of cha tions of registered agent.	anging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE. Registered Agent signalure required when reinstaling)	DATE	
	iling Fee is \$50.00 bue by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY -ST - ZIP	MGR LATOUR, DANIEL 1784 WEST AVE STE BAY 4 MIAMI BEACH, FL 33139			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000562661 05/19/06-80064-018 50.00	
TITLE NAME				

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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET-ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

TITLE

TITLE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Davtime Phone #