

2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A02000000843

FILED
Apr 28, 2006
Secretary of State

Entity Name: SEDRA FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

4750 N. FEDERAL HWY
SUITE #100
FT. LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

4750 N. FEDERAL HWY
SUITE #100
FT. LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 04-3691687 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SEDRA, MAGDA
4750 N. FEDERAL HWY
SUITE #100
FT. LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

GENERAL PARTNER INFORMATION:

Document #: L02000013203
Name: SPECTRACARE MEDICAL CENTER, LLC
Address: 4750 N. FEDERAL HWY #100
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MAGDA SEDRA

_____ Electronic Signature of Signing General Partner

MGR

04/28/2006

_____ Date