



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

<b>DOCUMENT # A02000001642</b>	
1. Entity Name DACRA WEST PALM BEACH, LTD.	

Principal Place of Business ATTN: CRAIG ROBINS 1632 PENNSYLVANIA AVENUE MIAMI BEACH, FL 33139	Mailing Address ATTN: CRAIG ROBINS 1632 PENNSYLVANIA AVENUE MIAMI BEACH, FL 33139
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**DO NOT WRITE IN THIS SPACE**

FILED  
06 APR 27 AM 10:25  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



04132006 No Chg-LP      CR2E003 (11/05)

4. FEI Number 42-1567121	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBINS, CRAIG  
1632 PENNSYLVANIA AVENUE  
MIAMI BEACH, FL 33139

**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  
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 #	P02000129361
NAME	DACRA WEST PALM BEACH, INC.
STREET ADDRESS	1632 PENNSYLVANIA AVENUE
CITY-ST-ZIP	MIAMI BEACH, FL 33139
DOCUMENT #	<i>\$3518</i>
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

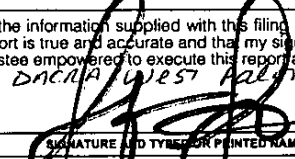
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STAPLE CHECK HERE

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.

*DACRA West Palm Beach, Inc. General Partner*

SIGNATURE:  DATE: *4/17/06* DAYTIME PHONE #: *305-531-8700*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*STEVEN GREENSTEIN, Vice President*