2002 UNIFORM BUSINESS REPORT (UBR)

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Not Applicable]
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EPT. OF STATE INFORMATION	
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1. Entity Name FILED POSTER BROTHERS, LP 02 AUG -6 AM 10: 23 Principal Place of Business Mailing Address

6852 PARISIAN WAY

LAKE WORTH FL 33467

SECRETARY OF STATE TALLAHASSEE, FLORIDA

3. Mailing Address

Suite, Apt. #, etc. **DUE BY SEPTEMBER 25, 20** City & State City & State 4. FEI Number 13-4080254 Zip Country Zip Country \$8.7 5. Certificate of Status Desired П Fee R 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

POSTER, STEVEN 6852 PARISIAN WAY LAKE WORTH FL 33467

DOCUMENT#

6852 PARISIAN WAY

LAKE WORTH FL 33467

Suite, Apt. #, etc.

2. Principal Place of Business

Street Address (P.O. Box Number is Not Acceptable) City

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 the obligations of registered agent.

SIGNATURE -Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record.

\$1,000.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DI SEE REVERSE SIDE FOR FEE

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. GENERAL PARTNER INFORMATION

14.	GENERAL FARTNER INFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT # NAME	POSTER, STEVEN	STREET ADDRESS	
STREET ADDRESS	ADDRESS 6852 PARISIAN WAY	CITY-ST-ZiP	
DOCUMENT # NAME	POSTER, JAY	STREET ADDRESS	-0 3/05/02 -0195 4015
STREET ADDRESS	Taddress 6852 Parisian way	CITY-ST-ZIP	****141.25
DOCUMENT # NAME	·	STREET ADDRESS	0000069544500 -08/07/0201076015
STREET ADORESS CITY-ST-ZIP		CITY-ST-ZIP	****141.25 ****141.25
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DOCUMENT # NAME *\$		STREET ADDRESS	
STREET ADDAĘSS CITY-ST-ZIP [#] Ľ		CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 ocute this report as by Chapter 620, Florida Statutes

SIGNATURE:

Date

Daytime Phone #

Poster Brothers, L.P.

6852 Parisian Way Lake Worth, Ff. 33467 (Phone) 561 -- 642 -- 0707 (Fax) 561 -- 964 -- 6001

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SECRETAILY OF STATE— TALLAHASSEE, FLORIDA

GIENTLEMEN,

PLEASE FIND ENCLOSED OUR

CHERK IN THE AMOUNT OF \$141.25.

WE'RE SORRY, HOWEVER THIS

IS THE ONLY NOTICE RECEIVED

10 DATÉ.

ADDITIONALLY, ON NOVEMBER 15

WE WILL BE MOVING 10:

2514 N.W. 59 ST.

BOCA RATON, FL 33496

Mark 400 30 fob (6.R)