

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A00000001199



1. Entity Name
SAPP INVESTMENTS LIMITED PARTNERSHIP

FILED

2003 MAR 17 AM 12:09

**DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA**



Principal Place of Business C/O DORIS KANE 319 MARSHALL STREET KENNETT SQUARE PA 19348	Mailing Address C/O MORRIS ENGELBERG, ESQ. 3230 STIRLING ROAD #1 HOLLYWOOD FL 33021
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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DUE BY MAY 1, 2003

4. FEI Number **65-1027107**

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ENGELBERG, MORRIS ESQ.
3230 STIRLING ROAD SUITE 1
HOLLYWOOD FL 33021**

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

FL

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.

9. Capital Contributions as Shown on record. **\$1,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

**11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

**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

13. ADDRESS CHANGES ONLY

DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
P00000072115	SAPP INVESTMENTS, INC.	3230 STIRLING ROAD SUITE 1	HOLLYWOOD FL 33021

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03/17/03--01015--012 **526.25

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 to execute this report as required by Chapter 620, Florida Statutes
Doris Kane, President of Sapp Investments, Inc.

SIGNATURE *Doris Kane* **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

03/14/03
Daytime Phone #

CR2E003 (10/02)