

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0007013 AT

DOCUMENT # A00000001363



1. Entity Name
GARAK FLP, LTD.

FILED

03 APR '03 10:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
2101 W HWY. 390, APT. 1007
LYNN HAVEN FL 32444

Mailing Address
2101 W HWY. 390, APT. 1007
LYNN HAVEN FL 32444

2. Principal Place of Business
1310 Vermont Ave.

3. Mailing Address
1310 Vermont Ave.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
Lynn Haven FL

City & State
Lynn Haven FL

4. FEI Number **59-3670091** Applied For
Not Applicable

Zip **32444** Country **BAY**

Zip **32444** Country **BAY**

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

6. Name and Address of Current Registered Agent
BABER, GEORGE LARRY JR
2101 W HWY. 390, APT. 1007
LYNN HAVEN FL 32444

7. Name and Address of New Registered Agent
Name: **Baber, George Larry Jr.**
Street Address (P.O. Box Number is Not Acceptable)
1310 Vermont Ave.
City **Lynn Haven FL** Zip Code **32444**

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 **4/8/03**

9. Capital Contributions as Shown on record. **\$10,000.00**

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 # | P00000075831 |
| NAME | GARAK INVESTMENTS, INC. |
| STREET ADDRESS | 2101 W HWY. 390, APT. 1007 |
| CITY-ST-ZIP | LYNN HAVEN FL 32444 |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
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| STREET ADDRESS | 1310 Vermont Ave |
| CITY-ST-ZIP | Lynn Haven FL 32444 |
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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

SIGNATURE: DATE **4/8/03**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

CR2E003 (10/02)

SAMPLE CHECK HERE