

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0001285 AV

DOCUMENT # A00000001779



FILED
03 FEB 14 AM 8:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name
3 BOWER ENTERPRISES, LTD.

Principal Place of Business
C/O THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE, SUITE 2400
MIAMI FL 33131

Mailing Address
C/O THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE, SUITE 2400
MIAMI FL 33131



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

4. FEI Number **65-1060774**
Applied For
Not Applicable

Zip Country Zip Country

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

FEUERMAN, JONATHAN ESQ.
C/O THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE, SUITE 2400
MIAMI FL 33131

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

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. **\$15,150,000.00**

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	
DOCUMENT #	P00000108180
NAME	BOWER GROUP, INC.
STREET ADDRESS	ONE S.E. 3RD AVE., SUITE 2400
CITY-ST-ZIP	MIAMI FL 33131
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	500010678625
CITY-ST-ZIP	02/18/03--01001--016 **88.75
STREET ADDRESS	500010678625
CITY-ST-ZIP	01/23/03--01096--001 **437.50
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<i>BK</i>
CITY-ST-ZIP	
STREET ADDRESS	
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 to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: SIGNATURE REQUIRED William Bower III 1/14/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CPRE003 (10/02)