

# 2002 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # **A01000000120**

FILED

1. Entity Name

**DAVID MILLARD ENTERPRISES LIMITED PARTNERSHIP**

02 MAR 11 PM 3:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

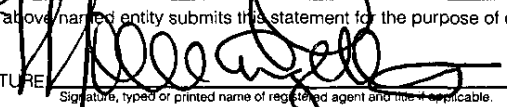
Principal Place of Business C/O ENGLEBERG, CANTOR & MILGRIM, P.L. 3230 STIRLING ROAD, #1 HOLLYWOOD FL 33021	Mailing Address C/O ENGLEBERG, CANTOR & MILGRIM, P.L. 3230 STIRLING ROAD, #1 HOLLYWOOD FL 33021
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2. Principal Place of Business C/O Engelberg & Milgrim, P.L., C/O Engelberg & Milgrim, P.L.	3. Mailing Address C/O Engelberg & Milgrim, P.L.	DUE BY MAY 1, 2002	
3230 Stirling Rd. Ste 1 City & State: Hollywood, FL Zip: 33021 Country: USA	3230 Stirling Rd. Suite 1 City & State: Hollywood, FL Zip: 33021 Country: USA	4. FEI Number	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CANTOR, JERALD C ESQ. C/O ENGLEBERG, CANTOR & MILGRIM, P.L. 3230 STIRLING ROAD, #1 HOLLYWOOD FL 33021	7. Name and Address of New Registered Agent Name: Engelberg, Morris Esc. Street Address (P.O. Box Number is Not Acceptable): C/O Engelberg & Milgrim, P.L. 3230 Stirling Road, Suite 1 City: Hollywood FL Zip Code: 33021
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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.

SIGNATURE:  DATE: 01/29/02

9. Capital Contributions as Shown on record. <b>\$1,258,740.00</b>	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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 #	P01000008418	STREET ADDRESS	
NAME	DAVID MILLARD ENTERPRISES, INC.	CITY-ST-ZIP	
STREET ADDRESS	3230 STIRLING ROAD, #1		
CITY-ST-ZIP	HOLLYWOOD FL 33021		
DOCUMENT #		STREET ADDRESS	500005108625--9
NAME		CITY-ST-ZIP	-03/14/02--01065--031
STREET ADDRESS			****526.25 ****526.25
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		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:  President 2/4/02 713-827-8853

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE

CR2E003 (9/01)