

LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT

FILED
03 APR 28 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A0100000631
1. Entity Name
BLT HOLDINGS, LTD.

Principal Place of Business 125 Worth Avenue Suite 302 Palm Beach, FL 33480	Mailing Address 125 Worth Avenue Suite 302 Palm Beach, FL 33480
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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 33407	Country USA	Zip 33407	Country USA
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DUE BY MAY 1, 2003

4. FEI Number 65-0934403	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

Tolley, Barbara
125 Worth Avenue, Suite 302
Palm Beach, FL 33480

7. Name and Address of New Registered Agent

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (Note: registered Agent signature required when reinstating)

9. Capital Contributions as shown on record. \$610,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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	
DOCUMENT #	F01000002477
NAME	BLT Enterprises, Inc.
STREET ADDRESS	125 Worth Avenue
CITY-ST-ZIP	Palm Beach, FL 33480
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	000017211900
CITY-ST-ZIP	04/28/03--01111--008 **526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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)(j), 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  **Barbara Tolley, President** **April 23, 2003** **(561) 588-2502**
SIGNATURE AND TYPE OF SIGNING GENERAL PARTNER Date Daytime Phone #