

2002 UNIFORM BUSINESS REPORT (UBR)

0018224 AB

DOCUMENT # **A01000001089**

FILED

1. Entity Name

R.K. HALLANDALE LIMITED PARTNERSHIP

02 MAR 11 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

17100 COLLINS AVENUE
MIAMI BEACH FL 33160

Mailing Address

% R.K. ASSOCIATES, INC.
PO BOX 111
DEDHAM MA 02027-0111



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number

04-3573512

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

Name: *Raanan Katz*
Street Address (P.O. Box Number is Not Acceptable): *17100 Collins Avenue Suite 225*
City: *Miami Beach* FL Zip Code: *33160*

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: *Raanan Katz* RAANAN KATZ, PRESIDENT

DATE: 3-1-02

9. Capital Contributions as Shown on record. **\$7,500.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO 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 #	P01000080251
NAME	R.K. HALLANDALE, INC.
STREET ADDRESS	17100 COLLINS AVENUE
CITY-ST-ZIP	MIAMI BEACH FL 33160
DOCUMENT #	
NAME	
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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: *Raanan Katz* RAANAN KATZ, PRESIDENT

DATE: 3-1-02

DAYTIME PHONE #: 305-949-4110

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

STAPLE CHECK HERE

CP2E003 (9/01)