


2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0002994 AV

DOCUMENT # A02000000618

1. Entity Name
ABBY FINANCIAL PARTNERS, LTD.



FILED
03 JUN -5 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
3100 N.E. 48TH STREET, SUITE 917
FORT LAUDERDALE FL 33308

Mailing Address
3100 N.E. 48TH STREET, SUITE 917
FORT LAUDERDALE FL 33308

| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

DUE BY MAY 1, 2003

| | |
|---|--|
| 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

RUNCO, RICHARD
3100 N.E. 48TH STREET, SUITE 917
FORT LAUDERDALE FL 33308

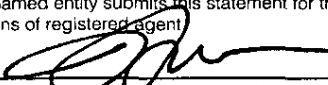
7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **RICHARD RUNCO** DATE **MAY 30, 2003**

| | | |
|--|---|--|
| 9. Capital Contributions as Shown on record. \$990.00 | 10. Amount of Capital Contributions in FLORIDA to date. \$990.00 | 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 # NAME STREET ADDRESS CITY - ST - ZIP | P01000104413 GATOR ASSOCIATES, INC. 3100 N.E. 48TH STREET, SUITE 917 FORT LAUDERDALE FL 33308 |
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| 13. ADDRESS CHANGES ONLY | |
|--------------------------|--------------------------------------|
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| STREET ADDRESS | 300020545803 |
| CITY - ST - ZIP | 06/05/03--01074--006 **141.25 |
| 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)(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  **RICHARD RUNCO** DATE **MAY 31, 2003** **954** **771-4833**

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

CR2E003 (10/02)