


2002 UNIFORM BUSINESS REPORT (UBR)

0002301 AV

DOCUMENT # A06253
 1. Entity Name
RAVENSWOOD WAREHOUSE INVESTORS, LTD.

FILED **LF**
 02 APR 24 PM 2:47
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA


Principal Place of Business 20801 BISCAYNE BLVD. SUITE 505 NORTH MIAMI BEACH FL 33180	Mailing Address 20801 BISCAYNE BLVD. SUITE 505 NORTH MIAMI BEACH FL 33180
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

DUE BY MAY 1, 2002

4. FEI Number **59-1817533** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DADE COUNTY CORPORATE AGENTS, INC.
 20801 BISCAYNE BLVD.
 SUITE 505
 NORTH MIAMI BEACH FL 33180

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.

9. Capital Contributions as Shown on record. **\$442,492.45**

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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	FROMBERG, LYNN W. 20801 BISCAYNE BLVD., #505 N. MIAMI BEACH FL 33180
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	FROMBERG, MALCOLM H. 20801 BISCAYNE BLVD., #505 N. MIAMI BEACH FL 33180
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GROSS, LESLIE JAY 10471 S.W. 126TH ST. MIAMI FL 33176
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	COHEN, JEFFREY M. 2601 S. BAYSHORE DR. PENTHOUSE 1B MIAMI FL 33133
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	SHORE, H. ALLAN 1 GROVE ISLE DR., #1106 COCONUT GROVE FL 33133
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	900005395569--7 -04/30/02--01078--023
CITY-ST-ZIP	*****526.25 *****526.25
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: *[Signature]* **GENERAL PARTNER** **4/18/02** **305-933-2000**

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

CR2E003 (9/01)