

2001 UNIFORM BUSINESS REPORT (UBR)

0013862 AF

DOCUMENT # A27812

1. Entity Name

A J A PROPERTIES NO. 2, LTD.

FILED

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FEB -9 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
C/O PETER LAWRENCE COMMERCIAL REAL ESTATE
4710 EISENHOWER BLVD., SUITE C-1
TAMPA FL 33634-6334

Mailing Address
C/O PETER LAWRENCE COMMERCIAL REAL ESTATE
4710 EISENHOWER BLVD., SUITE C-1
TAMPA FL 33634-6334

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0102868**

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

7. Name and Address of New Registered Agent

PETER LAWRENCE COMMERCIAL REAL ESTATE, INC
4710 EISENHOWER BLVD.
SUITE C-1
TAMPA FL 33634-6334

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. **\$1,875,000.00**

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 # **K84144**
NAME **NALLA 2600 CORPORATION**
STREET ADDRESS **4710 EISENHOWER BLVD., SUITE C-1**
CITY-ST-ZIP **TAMPA FL 33634-6334**

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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

James J. Shapiro, President Nalla 2600 Corp.

SIGNATURE: *James J. Shapiro*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/1/01 **813-889-8855**
Date Daytime Phone #

CR2E003 (11/00)