

2000 UNIFORM BUSINESS REPORT (UBR)

0013713 AI

DOCUMENT # A96000001185
 1. Entity Name
PEBB ENTERPRISES UNIVERSITY BANK BUILDING LTD.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

00 APR 25 AM 3:05

Principal Place of Business: **1000 CORPORATE DRIVE, SUITE 210 FORT LAUDERDALE FL 33334**
 Mailing Address: **1000 CORPORATE DRIVE, SUITE 210 FORT LAUDERDALE FL 33334-3655**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip

4. FEI Number **65-0675503**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
ROSENBERG, JEFFREY M
1000 CORPORATE DRIVE, SUITE 210
FORT LAUDERDALE FL 33334

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. **\$9,900.00**
 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	
DOCUMENT #	P96000039415
NAME	PEBB MANAGEMENT COMPANY, INC.
STREET ADDRESS	1000 CORPORATE DRIVE, SUITE 210
CITY - ST - ZIP	FORT LAUDERDALE FL 33334
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
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DOCUMENT #	
NAME	
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CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	700003256417-4
CITY - ST - ZIP	-05/18/00--01006--003 ***158.05 ***158.05
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)(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: Jeffrey Rosenberg 4/18/00 954 771-3305
 SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

1661003 0003256417-4