

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # A96000001919**

1. Entity Name

**PEBB ENTERPRISES DELRAY COMMONS LTD.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR 24 AM 3:05

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



DO NOT WRITE IN THIS SPACE

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

4. FEI Number	65-0701343	Applied For	
		Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ROSENBERG, JEFFREY M 1000 CORPORATE DRIVE, SUITE 210 FORT LAUDERDALE FL 33334		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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (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
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**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 #	P96000039415	STREET ADDRESS	
NAME	PEBB MANAGEMENT COMPANY, INC.	CITY - ST - ZIP	
STREET ADDRESS	1000 CORPORATE DRIVE, SUITE 210		
CITY - ST - ZIP	FORT LAUDERDALE FL 33334		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
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NAME		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)(f), 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* **SIGNATURE REQUIRED** *4/18/00* **DATE** *(954) 771-3305* **DAYTIME PHONE #**

CR25003 (9/00)