

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A97000002748

1. Entity Name
ADCO ACQUISITION PARTNER, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 21 AM 3:05

Principal Place of Business
1400 N.W. 107TH AVENUE
MIAMI FL 33172-2704

Mailing Address
1400 N.W. 107TH AVENUE
MIAMI FL 33172-2746



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0818932		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
LEVY, JOEL 1400 N.W. 107TH AVENUE MIAMI FL 33172-2704				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. \$20,640,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 #	P97000105810	STREET ADDRESS	
NAME	ADLER ACQUISITION AP-GP, INC.	CITY - ST - ZIP	
STREET ADDRESS	1400 N.W. 107TH AVENUE		
CITY - ST - ZIP	MIAMI FL 33172-2704		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
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STREET ADDRESS			
CITY - ST - ZIP			

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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

SIGNATURE: SIGNATURE REQUIRED DATE: 3/26/00 DAYTIME PHONE #: (305) 392-4051

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

By: Lynda K. Adler, as Assistant Secretary of ADCO Acquisition AP-GP, LLC.

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