

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A98000000852
 1. Entity Name
 SHOPPING PLAZA AT WILTON MANORS, LTD.

FILED
 00 JUN -2 PM 4: 20
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
 2300 CORAL WAY
 SUITE 111, CANTELOP BLDG.
 MIAMI FL 33145

Mailing Address
 2300 CORAL WAY
 SUITE 111, CANTELOP BLDG.
 MIAMI FL 33145-3511

2. Principal Place of Business
 1717 N. Bayshore Dr.

3. Mailing Address
 1717 N. Bayshore Dr.

Suite, Apt. #, etc.
 Suite 208

Suite, Apt. #, etc.
 Suite 208

City & State
 Miami, FL

City & State
 Miami, FL

4. FEI Number **65-0843593**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 DADE CORPORATE SERVICES, INC.
 2300 CORAL WAY,
 SUITE 103, CANTELOP BLDG.
 MIAMI FL 33145

7. Name and Address of New Registered Agent
 Name
 S&K Property Management, Inc.
 Street Address (P.O. Box Number is Not Acceptable)
 1717 N. Bayshore Dr.,
 Suite 208
 City
 Miami FL Zip Code
 33132

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 *Lidia Cartaya* Lidia Cartaya, Vice President
 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. **\$500,000.00**

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 # NAME STREET ADDRESS CITY - ST - ZIP	P98000043111 USA INVESTMENTS-MIAMI, CORP. 2300 CORAL WAY, SUITE 111 MIAMI FL 33145	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: *Lidia Cartaya* **SIGNATURE REQUIRED** 4/27/00 305 577-3885
 Signature and typed or printed name of signing general partner Date Daytime Phone #

C-32E00C (5/99)