## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE AND ESTATE OF PRESIDENT OF FINDER AS GONERAL Partner of Friday PM, Ltd.

DOCUMENT # A9800001289  1. Entity Name				W		
FRIDAY	P.M., LTD.			FILED		
Principal Place of Business Mailing Address			·	01 MAR 26 PM 1: 07		
1115 CHEETAH TRAIL WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708				SECRETARY OF STATE TALLAHASSEE FLORIDA		
670 1		3. Mailing Address 670 W. FAIR	BANTKS ANE.	DO NOT WRITE IN THIS SPACE		
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WHITE IN THIS SPACE		
City & State  City & State  WINTER PAR			4. FEI Number Applied For Not Applicable Not Applicable			
Zip Country Zip		<del>                                     </del>	Country	5. Certificate of Status Desired	\$8.75 Additional	
<del></del> -	6. Name and Address of Current		USA	7. Name and Address of New Registered	Fee Required	
o. Hame and Address of Guttern registered Agent			Name			
FREYTAG, ELLEN 1115 CHEETAH TRAIL			Street Address (P.O. Box Number is Not Acceptable)			
WINTER SPRINGS FL 32708						
			City	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						
-A. Capital Contributions 10 Amount of Capital Contributions 11 MAKE CHECK PAVABLE TO DEPT OF STATE						
as Shown on record.  \$ 172,000.00 in FLORIDA to date.  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.						
			13.	ADDRESS CHANGES ON	ILY	
NAMÉ	P98000041269   FRI-REAL, INC.		STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	1115 CHEETAH TRAIL WINTER SPRINGS FL 32708		CITY-ST-ZIP			
DOCUMENT # NAME			STREET ADDRESS	-03/30/0101055014 ****526.25 ****526.25		
STREET ADDRESS CITY-ST-ZIP	;		City-St-Zip			
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DOCUMENT # NAME			STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	3 · · · · · · · · · · · · · · · · · · ·		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						