

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000000626**

FILED

1. Entity Name

1471 OFFICE BUILDING, LTD.

02 JAN 16 PM 2:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
C/O SIDNEY GIMBEL  
10155 COLLINS AVENUE, SUITE 1907  
BAL HARBOUR FL 33154

Mailing Address  
C/O SIDNEY GIMBEL  
10155 COLLINS AVENUE, SUITE 1907  
BAL HARBOUR FL 33154



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number

65-0911672

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEVINE, ALAN W ESQ.  
1110 BRICKELL AVENUE, 7TH FLOOR  
MIAMI FL 33131

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.

DATE

9. Capital Contributions  
as Shown on record.

\$400,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

400,000.00

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 # P97000008152  
NAME A.G. ELITE CORP.  
STREET ADDRESS 10155 COLLINS AVENUE, PH 7  
CITY-ST-ZIP BAL HARBOUR FL 33154

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS 200004789482--7  
CITY-ST-ZIP 01/22/02 01113-003  
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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: *A.G. ELITE CORP*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/14/02  
Date

305-866-9542  
Daytime Phone #

UNLEADS 71

CPRE003 (6/01)

STAPLE CHECK HERE