

2001 UNIFORM BUSINESS REPORT (UBR)

0007837 AF

DOCUMENT # A99000001512
 1. Entity Name
REDWOOD VENTURES, LTD.

FILED
 01 APR 27 AM 11:51
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
 7900 GLADES ROAD 7900 GLADES ROAD
 STE 510 320 STE 510 320
 BOCA RATON FL 33434 BOCA RATON FL 33434



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
STE. 320 **STE. 320**
 City & State City & State
 Zip Country Zip Country

4. FEI Number Applied For
65-0950197 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
JACOBSON, HAROLD B.
 7900 GLADES ROAD, STE 510
 BOCA RATON FL 33434

7. Name and Address of New Registered Agent
 Name
JACOBSON, HAROLD B
 Street Address (P.O. Box Number is Not Acceptable)
 7900 GLADES ROAD, STE. 320
 City State Zip Code
 BOCA RATON FL 33434-4104

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]* **Harold B. Jacobsen 4-10-01**
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. **\$17,000,000.00** 10. Amount of Capital Contributions in FLORIDA to date. **0** 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	
DOCUMENT #	K64236
NAME	SUPREMA INC
STREET ADDRESS	7900 GLADES ROAD, #510
CITY-ST-ZIP	BOCA RATON FL
DOCUMENT #	L99000005646
NAME	TAG, L.C.
STREET ADDRESS	7900 GLADES ROAD, #510
CITY-ST-ZIP	BOCA RATON FL
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	79003GLADES ROAD, #320
CITY-ST-ZIP	BOCA RATON FL 33434
STREET ADDRESS	7900 GLADES ROAD, #320
CITY-ST-ZIP	BOCA RATON FL 33434
STREET ADDRESS	300004213523--3
CITY-ST-ZIP	05/11/01 01150 015 ***141.25 ***141.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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)(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]* **Harold B. Jacobsen 4-10-01**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)