

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **B97000000117**

1. Entity Name

BROWARD INTERNATIONAL COMMERCE PARK, LIMITED PAR

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR -1 AM 9:10

Principal Place of Business
C/O DANTO INVESTMENT COMPANY
1700 STUTZ DRIVE. NO. 25
TROY MI 48084

Mailing Address
C/O DANTO INVESTMENT COMPANY
1700 STUTZ DRIVE. NO. 25
TROY MI 48084-4502



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **38-3336720**

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

**GODOFSKY, LAWRENCE
1221 BRICKELL AVENUE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. **\$2,600,000.00**

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 # **F92000000668**
NAME **DANTO INVESTMENT COMPANY**
STREET ADDRESS **1700 STUTZ DRIVE, NO. 25**
CITY - ST - ZIP **TROY MI 48084**

STREET ADDRESS
CITY - ST - ZIP *mf 3/14/00*

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS
CITY - ST - ZIP **300003170179--1
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****526.25 ****526.25**

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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: JAMES DANTO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date **2/22/00** Daytime Phone # **248-649-4770**

CR2E003 (9/99)