

FILED


03 APR 30 AM 11:03

SECRETARY OF STATE
TALLAHASSEE FLORIDA

2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B9900000093

1. Entity Name
FBEC - BRICKELL KEY CENTRE, L.P.



Principal Place of Business
C/O HAGAN & ASSOC.//ATTN: MIA DELGADO
200 EAST RANDOLPH, SUITE 4322
CHICAGO, IL 60601

Mailing Address
C/O HAGAN & ASSOC.//ATTN: MIA DELGADO
200 EAST RANDOLPH, SUITE 4322
CHICAGO, IL 60601

4/30

000017588790
04/30/03--01080--004 **526.25



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

4. FEI Number
36-4274328

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

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and date if applicable.

9. Capital Contributions as Shown on record. \$29,724,851.00

10. Amount of Capital Contributions in FLORIDA to date. 29,724,851.00

11. MAKE CHECK PAYABLE TO FL 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 #	M9900000272	STREET ADDRESS	
NAME	BRICKELL KEY CENTRE - FBEC, L.L.C.	CITY-ST-ZIP	04/30/03 01080 004 **526.25
STREET ADDRESS	601 BRICKELL KEY DRIVE, SUITE 600		
CITY-ST-ZIP	MIAMI, FL 33131		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
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: Stephen A. Smith 4/15/03 30228.2050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STEPHEN A. SMITH, VICE PRESIDENT & TREASURER
OF FLORIDA OFFICE PROPERTY COMPANY INC.,
GENERAL PARTNER OF BRICKELL KEY CENTRE-
FBEC, LLC

STAPLE CHECK HERE

CR 03 (10/02)