

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A07724**

1. Entity Name

**BYRON FLAGLER, LTD.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 JUL 17 PM 1:25

Principal Place of Business % BORIS ROSEN 25 S.E. 2ND AVE., STE. 220 MIAMI FL 33131	Mailing Address % BORIS ROSEN 25 S.E. 2ND AVE., STE. 220 MIAMI FL 33131
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
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4. FEI Number <b>59-1931343</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**MARBIN, EVAN R**  
**48 E FLAGLER STREET**  
**PH-104**  
**MIAMI FL 33131**

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. <b>\$397,048.68</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>\$397,048.68</b>	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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 #	<b>KOZOLCHYK, BENNY</b> <b>2076 NE 121ST ROAD</b> <b>MIAMI BEACH FL</b>	STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
DOCUMENT #	<b>ROK, NATAN</b> <b>20 SE 1 AVE</b> <b>MIAMI FL</b>	STREET ADDRESS	<b>800003334998--8</b>
NAME		CITY-ST-ZIP	<b>-07/25/00-01050-009</b>
STREET ADDRESS			<b>***926.25 ***926.25</b>
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			

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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**NATAN R. ROK - General Partner**

7/11/00

Date

(305) 377-4921

Daytime Phone #

CR2E003 (5/00)