

2001 UNIFORM BUSINESS REPORT (UBR)

0004172 AF

DOCUMENT # **A98000001843**

1. Entity Name

ALLAPATTAH GARDENS, LTD.

Principal Place of Business

**2937 S.W. 27TH AVENUE, SUITE 303
MIAMI FL 33133**

Mailing Address

**2937 S.W. 27TH AVENUE, SUITE 303
MIAMI FL 33133**

2. Principal Place of Business

**c/o New Century Development Corporation, Inc.
5400 NW 22 Avenue, Suite 705**

3. Mailing Address

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

SAME AS LEFT

4. FEI Number

65-0852731

Applied For

Not Applicable

Zip

Country

33142

Zip

Country

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GREEN, PATRICIA K
150 W. FLAGLER ST., 2200 MUSEUM TOWER
MIAMI FL 33130**

7. Name and Address of New Registered Agent

Name
Lynn C. Washington, Esq.
Street Address (P.O. Box Number is Not Acceptable)
701 Brickell Avenue, Suite 3000
3300
City **Miami** FL Zip Code **33131**

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

Lynn C. Washington

Lynn C. Washington

2-16-01

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.

\$99.99

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

DOCUMENT # **P98000066569**
NAME **ALLAPATTAH GARDENS, INC. DELETE**
STREET ADDRESS **2937 S.W. 27TH AVENUE, SUITE 303**
CITY-ST-ZIP **MIAMI FL 33133**

DOCUMENT # **752815**
NAME **NEW CENTURY DEVELOPMENT CORPORATION, INC.**
STREET ADDRESS **2937 S.W. 27TH AVENUE, SUITE 303**
CITY-ST-ZIP **MIAMI FL 33133**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

5400 NW 22 Avenue, Suite 705

Miami, FL 33142

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****150.00 ****150.00**

hpl

2/19

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone

2-16-01 (305) 638-4752

CR2E003 (11/00)

FILED
01 FEB 19 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE