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2002 UN	IFORM BUS	INESS REP	ORT	(UBF	₹)			1	,	}
				SECRETARY OF STATE DIVISION OF CORPORATIONS						
SB PARTNERS, LTD.			VISION OF C	PH 12: 10			-			
Principal Place of Business Mailing Address 1251 AVENUE OF THE AMERICAS 36TH FL NEW YORK NY 10020 Mailing Address 1251 AVENUE OF THE AMERICAS 36TH FL NEW YORK NY 10020			S	,				1811 81811 81811 81811 81811	M	
2. Principal Place of Bus	siness 3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DUE BY MAY 1, 2002				
City & State	***************************************	City & State			13-6294787		Applied F Not Applie			
Zìp	Country	Zip	Cour	ntry		5. Certificate of	f Status Desired		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				Name	-	7. Name and A	ddress of New R	egistered A	lgent	\blacksquare
NRAI SERVICES, INC. 526 E. PARK AVENUE				dress (F	P.O. Box Number	is Not Acceptable	·)			
TALLAHASSEE FL										\dashv
			City 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										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions \$28,747,882.00 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE						E				
as Shown on record.	GENERAL PARTNER T	in FLORIDA to	NTITY N	28,74 IUST BE F	REGIST	ERED AND A	TIVE WITH TH	S OFFICE	R FEE INFORMATIOI	1
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 # P02962 NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # P02962 SB PARTNERS REAL ESTATE CORPORATION 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020			ET ADDRESS			ADDRESS CHA	INGES UIVL	<u>. Y</u>	ᅱᇶ	
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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

BY: SB Partners Real Estate Corporation

SIGNATURE: BY: Ellips Boxon (Associated Partner)

SIGNATURE: BY: Ellips Boxon (Associated Partner)

SIGNATURE: Date Daytine Phone #