

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

02 JUN -3 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A96000000001

1. Entity Name

QUIET TECHNOLOGY VENTURE, LTD.

Principal Place of Business

2000 NW 62ND AVENUE
BLDG. 711, SUITE 100
MIAMI FL 33122

Mailing Address

2000 NW 62ND AVENUE
BLDG. 711, SUITE 100
MIAMI FL 33122

2. Principal Place of Business

12845 NW 45 Avenue

3. Mailing Address

12845 NW 45 Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

Opalocka, FL

City & State

Opalocka, FL

4. FEI Number

65-0639618

Applied For

Not Applicable

Zip

33054

Country

US

Zip

33054

Country

US

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

QUIET TECHNOLOGY DC-8, INC.

2261 N.W. 67TH AVE., BLDG. #700

MIAMI FL 33126

Name

Street Address (P.O. Box Number is Not Acceptable)

12845 NW 45 Avenue

City

Opalocka

FL

Zip Code

33054

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, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions

\$8,931,933.00

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 # P96000000009
NAME QUIET TECHNOLOGY DC-8, INC.
STREET ADDRESS 2261 N.W. 67TH AVE., BLDG. #700
CITY-ST-ZIP MIAMI FL 33126

STREET ADDRESS 12845 NW 45 Avenue
CITY-ST-ZIP Opalocka, FL 33054

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS 700005693447--7
CITY-ST-ZIP 06/06/02 01012 021
*****526.25 *****526.25

DOCUMENT #
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

305-687-9808

Date

Daytime Phone #

CR2E003 (9/01)