

**2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A97000000387

1. Entity Name
M.P.A. OF KEY WEST LIMITED PARTNERSHIP



Principal Place of Business
**5341 5TH AVENUE
KEY WEST FL 33040**

Mailing Address
**5341 5TH AVENUE
KEY WEST FL 33040**

FILED
03 JAN 23 AM 9:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address
2330 N. Roosevelt Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State
Key West, Florida

4. FEI Number **65-0729968**

Applied For

Not Applicable

Zip

Country

Zip
33040

Country

USA

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

**BOHATCH, JOHN S
19 WEST FLAGLER ST.
14TH FLOOR
MIAMI FL 33130**

Name

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

City

3000 10670883

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.

01/23/03--01056--006 **526.25

SIGNATURE

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

DATE

9. Capital Contributions
as Shown on record.

\$1,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
**STELLER, MURRAY
2330 N. ROOSEVELT BLVD.
KEY WEST FL 33040**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**STELLER, PANAGIOTA
2330 N. ROOSEVELT BLVD.
KEY WEST FL 33040**

STREET ADDRESS

CITY-ST-ZIP

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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:

Murray Steller
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-18-03

Date

Daytime Phone #

CR2E003 (10/02)

0008360 AT