

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

|                                             |                                                                                   |
|---------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # A01000000805</b>              |  |
| 1. Entity Name<br><b>AYA PARTNERS, LTD.</b> |                                                                                   |

FILED

03 JUL 24 PM 3:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|                                                                              |                                                                                                      |
|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| Principal Place of Business<br>7935 TALAVERA PLACE<br>DELRAY BEACH, FL 33446 | Mailing Address<br>C/O M & W AGENTS, INC.<br>2101 CORPORATE BLVD., SUITE 107<br>BOCA RATON, FL 33431 |
|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|

|                                                        |                     |
|--------------------------------------------------------|---------------------|
| 2. Principal Place of Business<br>2101 Corporate Blvd. | 3. Mailing Address  |
| Suite, Apt. #, etc.<br>Suite 107                       | Suite, Apt. #, etc. |
| City & State<br>Boca Raton, FL                         | City & State        |
| Zip<br>33431                                           | Country<br>USA      |

|                                                           |                                |
|-----------------------------------------------------------|--------------------------------|
| DUE BY MAY 1, 2003                                        |                                |
| 4. FEI Number<br>65-1114629                               | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

|                                                                               |  |
|-------------------------------------------------------------------------------|--|
| 6. Name and Address of Current Registered Agent                               |  |
| M & W AGENTS, INC.<br>2101 CORPORATE BLVD., SUITE 107<br>BOCA RATON, FL 33431 |  |

|                                                    |             |
|----------------------------------------------------|-------------|
| 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

|                                                              |                                                         |                                                                                  |
|--------------------------------------------------------------|---------------------------------------------------------|----------------------------------------------------------------------------------|
| 9. Capital Contributions as Shown on record. \$50,000,000.00 | 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 #                      | P01000064836           | STREET ADDRESS           |                               |
| NAME                            | AYA HOLDINGS, INC.     | CITY - ST - ZIP          |                               |
| STREET ADDRESS                  | 7936 TALAVERA PLACE    |                          |                               |
| CITY - ST - ZIP                 | DELRAY BEACH, FL 33446 |                          |                               |
| DOCUMENT #                      |                        | STREET ADDRESS           | 100021749011                  |
| NAME                            |                        | CITY - ST - ZIP          | 07/24/03--01001--005 **926.25 |
| STREET ADDRESS                  |                        |                          |                               |
| CITY - ST - ZIP                 |                        |                          |                               |
| DOCUMENT #                      |                        | STREET ADDRESS           |                               |
| NAME                            |                        | CITY - ST - ZIP          |                               |
| STREET ADDRESS                  |                        |                          |                               |
| CITY - ST - ZIP                 |                        |                          |                               |
| DOCUMENT #                      |                        | STREET ADDRESS           |                               |
| NAME                            |                        | CITY - ST - ZIP          |                               |
| STREET ADDRESS                  |                        |                          |                               |
| CITY - ST - ZIP                 |                        |                          |                               |
| DOCUMENT #                      |                        | STREET ADDRESS           |                               |
| NAME                            |                        | CITY - ST - ZIP          |                               |
| 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: _____                                               | 7-18-03 | Daytime Phone # _____ |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER |         |                       |

CR2E003 (10/02)

STAPLE CHECK HERE