

2001 UNIFORM BUSINESS REPORT (UBR)

001856 AF

DOCUMENT # A00000000156

1. Entity Name

SOFRAN TAVARES (ECK), LTD.

FILED

Handwritten signature

Principal Place of Business

808 THIRD STREET, SUITE C
NEPTUNE BEACH FL 32266

Mailing Address

808 THIRD STREET, SUITE C
NEPTUNE BEACH FL 32266

01 MAR 19 AM 7:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

245 Peachtree Center Ave, NE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 2800

DO NOT WRITE IN THIS SPACE

City & State

City & State

Atlanta, GA

4. FEI Number

58-2525914

Applied For

Not Applicable

Zip

Country

Zip

Country

30303-1227

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Robert Rouleau

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

808 Third Street, Suite C

City

Neptune Beach

FL

Zip Code

32266

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 Robert Rouleau

(NOTE: Registered Agent Signature required when reinstating)

3/13/01

DATE

9. Capital Contributions
as Shown on record.

\$99.00

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 # P00441
NAME THE SOFRAN CORPORATION
STREET ADDRESS 808 THIRD STREET, SUITE C
CITY-ST-ZIP NEPTUNE BEACH FL 32266

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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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

The Sofran Corporation

SIGNATURE:

By: *Robert Rouleau*

3/13/01

904-241-5104

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)