

# 2002 UNIFORM BUSINESS REPORT (UBR)

0006217 AT

DOCUMENT # A00000000156

1. Entity Name

SOFRAN TAVARES (ECK), LTD.

FILED

03 FEB 20 AM 11:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MMJH



Principal Place of Business

808 THIRD STREET, SUITE C  
NEPTUNE BEACH FL 32266

Mailing Address

245 PEACHTREE CENTER AVE., N.E. 2800  
ATLANTA GA 30303-1227

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

58-2525914

Applied For

Not Applicable

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

ROBERT ROULEAU

808 THIRD STREET, SUITE C  
NEPTUNE BEACH FL 32266

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.

SIGNATURE

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

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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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: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Jan 29/02

241-5104

Date

Daytime Phone #

CR2E003 (9/01)