

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000000195

1. Entity Name

GW AND SBW, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAY -4 AM 7:53



DO NOT WRITE IN THIS SPACE

Principal Place of Business

2142 BAY AVENUE
MIAMI BEACH FL 33140

Mailing Address

2142 BAY AVENUE
MIAMI BEACH FL 33140

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0975809

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

WEINER, GARY
2142 BAY AVENUE
MIAMI BEACH FL 33140

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.

(NOT) Registered Agent signature required when reinstating

DATE

9. Capital Contributions
as Shown on record.

\$5,261,355.00

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

DOCUMENT # P930000022230 P00000010640
NAME SEL MANAGEMENT INC
STREET ADDRESS 2142 BAY AVENUE
CITY-ST-ZIP MIAMI BEACH FL
Corrected 4/9/01

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS The NAME is "JEL" NOT "EL"
CITY-ST-ZIP See Attached

STREET ADDRESS ~~000004220782-35~~
CITY-ST-ZIP ~~05/16/01-01115-012~~
~~****526.25 ****526.25~~

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP 200004220782-7
-05/16/01-01115-013

STREET ADDRESS
CITY-ST-ZIP ****437.50 ****437.50
200004220782-7
-05/16/01-01115-014

STREET ADDRESS
CITY-ST-ZIP *****88.75 *****88.75

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/15/2001

305-538-5353

Date

Daytime Phone #

0004670 AF

CR2E003 (11/00)