

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000000547

1. Entity Name

FLATAUR RC, LTD.

APPROVED
AND
FILED

02 MAY 22 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 1350 EAST NEWPORT CENTER DRIVE SUITE 206 DEERFIELD BEACH FL 33442	Mailing Address 1350 EAST NEWPORT CENTER DRIVE SUITE 206 DEERFIELD BEACH FL 33442
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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DUE BY MAY 1, 2002	
4. FEI Number 65-1007686	Applied For Not Applicable

5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

AKERMAN, SENTERFITT & EIDSON P.A.
SUITE 900 EAST TOWER
777 SOUTH FLAGLER DRIVE
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name
KAY, JAMES R.
Street Address (P.O. Box Number is Not Acceptable)
KAY LAW OFFICES
11505 FAIRCHILD GARDENS AVE. SUITE 203
City
PALM BEACH GARDENS FL Zip Code
33410

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 *James R. Kay, President* DATE *5/21/02*

9. Capital Contributions as Shown on record.	\$100.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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	P00000025408 REACOM, INC. 1350 EAST NEWPORT CENTER DRIVE, STE 206 DEERFIELD BEACH FL 33442	STREET ADDRESS	
		CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	700005677207--5 -06/04/02--01041--005
		CITY-ST-ZIP	****150.00 ****150.00
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		CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS 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: *James R. Kay* DATE *4-25-02* 954 4284586
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

0003758 AV

CR2E003 (9/01)