

2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A00000000742

1. Entity Name

WORKPLACE PROFESSIONAL INVESTORS, LTD.

FILED

Principal Place of Business

222 LAKEVIEW AVE., 17TH FLOOR
WEST PALM BEACH FL 33401

Mailing Address

222 LAKEVIEW AVE., 17TH FLOOR
WEST PALM BEACH FL 33401

01 MAR -8 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1009776

Applied For

Not Applicable

Zip

Country

Zip

Country

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

REGSERV CORP.

222 LAKEVIEW AVE., 17TH FLOOR
WEST PALM BEACH FL 33401

REGSERV CORP.

Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410

FL Zip Code

8. By: *Lawrence B. Juran*

Lawrence B. Juran, President

registered office or registered agent, or both, in the State of Florida.

1/23/01

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$1,000.00

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 # P00000045114
NAME WORKPLACE PROFESSIONAL EQUITY CORPORATION
STREET ADDRESS 222 LAKEVIEW AVE., 17TH FLOOR
CITY-ST-ZIP WEST PALM BEACH FL 33401

STREET ADDRESS ~~Gardens Corporate Center~~
CITY-ST-ZIP 3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410

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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

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Lawrence B. Juran
Vice President

1/23/01 (561) 630-5055
Date Daytime Phone #

CR2E003 (11/00)