

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0004196 AV

**DOCUMENT #** A00000000876  
**1. Entity Name**  
 STRAUB INVESTMENTS, LTD.



FILED

03 MAR 31 AM 8:55

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MJH

**Principal Place of Business**  
 440 ROYAL PALM WAY  
 SUITE 202  
 PALM BEACH FL 33480

**Mailing Address**  
 440 ROYAL PALM WAY  
 SUITE 202  
 PALM BEACH FL 33480



**2. Principal Place of Business**  
 450 Royal Palm Way  
 Suite, Apt. #, etc.  
 Suite 401  
 City & State  
 Palm Beach, FL

**3. Mailing Address**  
 450 Royal Palm Way  
 Suite, Apt. #, etc.  
 Suite 401  
 City & State  
 Palm Beach, FL

3/31

DUE BY MAY 1, 2003

**4. FEI Number** 65-1011175 Applied For  
Not Applicable

**5. Certificate of Status Desired**  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

CORPORATE CREATIONS ENTERPRISES, INC.  
 941 FOURTH STREET #200  
 MIAMI BEACH FL 33139

**7. Name and Address of New Registered Agent**

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. I am familiar with, and accept the obligations of registered agent.**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**9. Capital Contributions as Shown on record.** \$5,460,000.00 **10. Amount of Capital Contributions in FLORIDA to date.** \_\_\_\_\_ **11. MAKE CHECK PAYABLE TO FL. 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 #	H44441
NAME	STRAUB CAPITAL CORP.
STREET ADDRESS	440 ROYAL PALM WAY SUITE 202
CITY-ST-ZIP	PALM BEACH FL 33480
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	450 Royal Palm Way, Suite 401
CITY-ST-ZIP	Palm Beach, FL 33480
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	500014952125
CITY-ST-ZIP	03/31/03--01058--002 **535.00
STREET ADDRESS	
CITY-ST-ZIP	
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:** SIGNATURE REQUIRED 3/21/03 661-655-4441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)