

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000000909

1. Entity Name

DEBUYS PROPERTY INVESTMENT GROUP, LTD.

Principal Place of Business

11 SENECA ROAD
SEA RANCH LAKES FL 33308

Mailing Address

11 SENECA ROAD
SEA RANCH LAKES FL 33308

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

65-0097986

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GABRIEL, ALAN L ESQ.
INTERNATIONAL BUILDING, PENTHOUSE EAST
2455 EAST SUNRISE BLVD.
FORT LAUDERDALE FL 33304

7. Name and Address of New Registered Agent

Name

Manfred Franz

Street Address (P.O. Box Number is Not Acceptable)

11 Seneca Road

City

Sea Ranch Lakes

FL

Zip Code

33308

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

Manfred Franz

MANFRED FRANZ

1/22/02

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

DATE

9. Capital Contributions
as Shown on record.

\$2,800,000.00

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

DOCUMENT # P00000036456
NAME MJP LOX CORP.
STREET ADDRESS 11 SENECA ROAD
CITY-ST-ZIP SEA RANCH LAKES FL 33308

DOCUMENT #
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CITY-ST-ZIP

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DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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STREET ADDRESS

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CITY-ST-ZIP

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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:

Manfred Franz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

1/22/02

954 786 1714

CR2E003 (9/01)

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AV

FILED

02 JAN 31 AM 7:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

