

# 2001 UNIFORM BUSINESS REPORT (UBR)

0005648 AF

DOCUMENT # A00000001403

1. Entity Name

MEDLEY COMMERCE PARK, LTD. LLLP

FILED

01 MAY -1 PM 12:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

8725 N.W. 18TH TERRACE, SUITE 204  
MIAMI FL 33172

Mailing Address

8725 N.W. 18TH TERRACE, SUITE 204  
MIAMI FL 33172

2. Principal Place of Business

8725 NW 18TH TER  
Suite, Apt. #, etc.  
206

3. Mailing Address

8725 NW 18TH TER  
Suite, Apt. #, etc.  
206

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

Applied For

Not Applicable

Zip

33172

Country

Zip

33172

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DOUGLAS, PAUL  
8725 N.W. 18TH TERRACE, SUITE 204  
MIAMI FL 33172

7. Name and Address of New Registered Agent

Name

ROBERT CAMBO

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

8725 NW 18TH TER #206

City

MIAMI

FL

Zip Code

33172

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

*Robert Cambo*  
Signature typed or printed name of registered agent and title if applicable.

(NOT Registered Agent signature required when reinstating)

DATE

4/27/01

9. Capital Contributions  
as Shown on record.

\$100.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$100.00

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 # P00000085381  
NAME MC PARK, INC.  
STREET ADDRESS 8725 N.W. 18TH TERRACE, SUITE 204  
CITY-ST-ZIP MIAMI FL 33172

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

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

8725 NW 18TH TER, STE 206

CITY-ST-ZIP

MIAMI FL 33172

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

000004221870--1  
-05/17/01--01033--009  
\*\*\*\*141.25 \*\*\*\*141.25

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:

*Robert Cambo*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/27/01

305 929440

CR2E003 (11/00)