

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0001120 AT

**DOCUMENT # A00000001562**



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 AUG 13 PM 12: 28

8/21

1. Entity Name <b>HOUSTON WIRELESS PARTNERS, LTD., LLLP</b>	
Principal Place of Business <b>11000 PROSPERITY FARMS RD., STE. 204 PALM BEACH GARDENS FL 33410</b>	Mailing Address <b>11000 PROSPERITY FARMS RD., STE. 204 PALM BEACH GARDENS FL 33410</b>



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

**DUE BY SEPTEMBER 24, 2003**

4. FEI Number <b>65-1071066</b>		Applied For
		Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required

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

**SPIEGEL & UTRERA, P.A.**  
**343 ALMERIA AVENUE**  
**CORAL GABLES FL 33134**

**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. <b>\$1,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. 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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>DOMM, GEORGE W</b> <b>946 RODNEY DR.</b> <b>SAN LEANDRO CA 94577</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>CHEN, SHIRLEY</b> <b>3412 HACKNEY CT.</b> <b>RALEIGH NC 27813</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>ERVIN, JERRY</b> <b>9733 S. DELAWARE CT.</b> <b>TULSA OK 74137</b>
DOCUMENT # NAME STREET ADDRESS 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	
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CITY-ST-ZIP	

600013733846  
03/10/03 01077 006 \$150.00

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:** *George W. Domm* **8/4/03** 510-638-0656  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (4/03)

SAMPLE CHECK HERE