

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000001563

1. Entity Name

One Las Olas, Ltd.

FILED

01 SEP 19 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

c/o Gunster, Yoakley &
Stewart, P.A.

500 East Broward Blvd.,

Suite 1400, Ft. Lauderdale, FL 33394

Mailing Address

350 Theodore Fremd Avenue
Rye, NY 10580

2. Principal Place of Business

3. Mailing Address

100 EAST LAS OLAS BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

Fort Lauderdale, FL

4. FEI Number

58-2591765

Applied For

Not Applicable

Zip

Country

Zip

33301

Country

USA

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

Valdes-Fauli Corporate Services, Inc.
500 East Broward Blvd., Suite 1400
Ft. Lauderdale, FL 33394

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

7,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

7,000,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P00000055960
NAME Omni Equities Corporation
STREET ADDRESS 350 Theodore Fremd Avenue
CITY-ST-ZIP Rye, NY 10580

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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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

By: Omni Equities Corporation, as general partner of One Las Olas, Ltd.

SIGNATURE:

By: *[Signature]* as Vice President

9/7/01

954.467.6999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)