

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0009060
AT

DOCUMENT # A01000000086

1. Entity Name
THE MUY FAMILY LIMITED PARTNERSHIP



FILED

03 JAN 29 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
3251 EAST 11TH AVENUE
HIALEAH FL 33013

Mailing Address
3251 EAST 11TH AVENUE
HIALEAH FL 33013

2. Principal Place of Business

3. Mailing Address

190 W. 51 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

HIALEAH, FL

4. FEI Number

APPLIED FOR
030409564

Applied For

Not Applicable

Zip

Country

Zip

33012

Country

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

RICHMAN, SCOTT G ESQ.

19 WEST FLAGLER STREET, 14TH FLOOR

MIAMI FL 33130

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

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

DATE

1/7/03

9. Capital Contributions
as Shown on record.

\$1,000,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P01000004676
NAME MUY REALTY, INC.
STREET ADDRESS 3251 EAST 11TH AVENUE
CITY-ST-ZIP HIALEAH FL 33013

STREET ADDRESS

190 W. 51 ST.

CITY-ST-ZIP

HIALEAH, FL 33012

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

200009982352

CITY-ST-ZIP

01/03/03--01028--012 **150.00

DOCUMENT #
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CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

200009982352

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CITY-ST-ZIP

02/10/03--01119--002 **376.25

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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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

1/7/03

CR2E003 (10/02)

STAPLE CHECK HERE