

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A01000000442

1. Entity Name
CORMORANT ENTERPRISES LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 APR 30 PM 4:26

Principal Place of Business
3326 MARY STREET, SUITE 603
MIAMI FL 33133

Mailing Address
3326 MARY STREET, SUITE 603
MIAMI FL 33133



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2003

4. FEI Number ~~88-0469630~~
02-0592277

Applied For
Not Applicable

Zip

Country

Zip

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

WORLD CORPORATE SERVICES, INC.
2665 SOUTH BAYSHORE DRIVE, SUITE 703
MIAMI FL 33133

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

9. Capital Contributions as Shown on record. \$1,000.00

10. Amount of Capital Contributions in FLORIDA to date. 1,000.00

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 # F01000001791
NAME CORMORANT ENTERPRISES, INC.
STREET ADDRESS 1135 TERMINAL WAY, SUITE 209
CITY-ST-ZIP RENO NV 89502

STREET ADDRESS

CITY-ST-ZIP

200016065712

04/15/03 01034-001 **265.00

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

FF 141.25
overpaid
\$123.25
MP 5/2/03

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 REQUIRED

4/11/04

305 444 3177

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
JOSE DIAZ, PRESIDENT & CO. CORMORANT ENTERPRISES, INC.

Date

Daytime Phone #

CR2E003 (10/02)

0001422 AV