

**LIMITED PARTNERSHIP  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 29, 2002 8:00 A.M.**  
**Secretary of State**

DOCUMENT # A01000000582

1. Entry Name:  
**A C ENTERPRISES, LTD**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**18767 Biscayne Blvd.**  
State, Apt. #, etc.

3. Mailing Address  
**18767 Biscayne Blvd**  
State, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**Miami, FL**  
Zip  
**33180**

COUNTRY  
**USA**

City & State  
**Miami, FL**  
Zip  
**33180**

COUNTRY  
**USA**

4. FEI Number  
**65-1098942**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**DUE BY MAY 1**

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
**M & W AGENTS, INC.**  
Street Address (P.O. Box Number is Not Acceptable)  
**2101 Corporate Blvd., #107**  
City **Boca Raton** FL Zip Code **33431**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent, not applicable.

9. Capital Contributions as Shown on record. **2,000,000**

10. Amount of Capital Contributions in FLORIDA to date. \_\_\_\_\_

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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>ABCO HOLDINGS, INC.</b>	<b>18767 Biscayne Blvd</b>	<b>Aventura, FL 33180</b>

STREET ADDRESS	CITY-ST-ZIP
	<b>000006762960</b>
	<b>-07/30/02--01049--018</b>
	<b>****526.25 ****526.</b>

**DO NOT WRITE  
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report is true and correct, 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:  **Abraham Cohen** PRES. Date: **7/18/02** Telephone #: **305-448-1648**

CREATED BY: 12/01

STAPLE CHECK HERE

Attachment

ZJR

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 JUL 26 PM 2:13

A C ENTERPRISES, LTD.  
18767 Biscayne Boulevard  
Aventura, Florida 33180

July 18, 2002

Florida Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

RE: Document #A01000000582  
2002 Uniform Business Report

Dear Sir or Madam:

Enclosed please find our 2002 Uniform Business Report and our check for \$437.50 for the filing fee.

Please be advised that due to our change of address, we never received the 2002 Uniform Business Report in the mail. On this date, our accountant notified us that the report had not been filed and needed to be filed immediately.

Our new address is 18767 Biscayne Boulevard, Aventura, FL 33180

We apologize for any inconvenience and thank you for your cooperation in this matter.

Sincerely,

Abraham Cohen