

2002 UNIFORM BUSINESS REPORT (UBR)

0020367 SP

DOCUMENT # A01000000651

1. Entity Name

SAINT GAUDENS LIMITED PARTNERSHIP

FILED

2002 JUN -7 PM 12:24

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business

3695 SAIN GAUDENS RD.
COCONUT GROVE FL 33133

Mailing Address

3695 SAIN GAUDENS RD.
COCONUT GROVE FL 33133

2. Principal Place of Business

9559 HARDING AVE

3. Mailing Address

9559 HARDING AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

SURFSIDE FL

City & State

SURFSIDE FL

4. FEI Number

☒ Applied For

☐ Not Applicable

Zip

33154

Country

USA

Zip

33154

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LATOUR, DANIEL

3695 SAIN GAUDENS RD.

COCONUT GROVE FL 33133

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

9559 HARDING AVE

City

SURFSIDE

FL

33154

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.

DATE

9. Capital Contributions
as Shown on record.

\$30,000.00

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 # P99000070891
NAME MIAMI EXPERTS PARTNERS, INC.
STREET ADDRESS 3695 SAIN GAUDENS RD.
CITY-ST-ZIP COCONUT GROVE FL 33133

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

9559 HARDING AVE

CITY-ST-ZIP

SURFSIDE, FL, 33154

STREET ADDRESS

100005764131--7

-06/13/02--01007--003

CITY-ST-ZIP

*****210.00 *****210.00

STREET ADDRESS

88.75-Adm

CITY-ST-ZIP

210.00-LP

STREET ADDRESS

100005764131--7

CITY-ST-ZIP

-06/13/02--01007--004

*****88.75 *****88.75

STREET ADDRESS

CITY-ST-ZIP

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 #

04/30/02

CR2E003 (9/01)