## **2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)**

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**BOCA RATON FL 33432** 

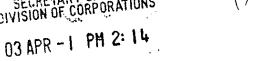
14. I hereby certify that the informatio indicated on this report is true and the receiver or trustee empowered

**SIGNATURE:** 

1. Entity Name TAB 200, LTD. Principal Place of Business
140 NORTH FEDERAL HIGHWAY. SECOND FLOOR Mailing Address 140 NORTH FEDERAL HIGHWAY. SECOND FLOOR

**BOCA RATON FL 33432** 

SECRETARY OF STATE DIVISION OF CORPORATIONS



2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2003					
City & State			City & State			4. FEI Number	4. FEI Number 65-1102606 Applied Fo				
Zip	Country Zip			Coun	Country 5. Certificate		of Status Desired \$8.75 Addition Fee Required				
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
SCHROEDER, MICHAEL A ESQ.					Name  Chart Address (B.O. Bau Number is Not Assessable)						
		ARCHE, P.A.			Street Address (P.O. Box Number is Not Acceptable) 120 E. Palmetto Park Road, Ste 150						
		, Suite 319 atrium									
BOCA RA	TON FL 33	431			City			Zin Code	,		
	Λ				City Boca	Raton		FL Zip Code			
8. The above	8. The above funed 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.										
the obligat	tonstot regist	eled agent.	.1.				<b>ə</b> /	10/12	Į.		
SIGNATURE -	1200	my , bym	<u> </u>				ر/ح	(8)(05			
O Comital Co		or printed name of registered agent a	<del></del>	of Capital Captril	hutione		11 MAYE CHECK PA	VARIE TO EL DEPT	OF STATE		
	9. Capital Contributions as Shown on record.  10. Amount of Capital (in FLORIDA to date				Oblions	ions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF SEE REVERSE SIDE FOR FEE INFORMAT					
	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 CHANG	ES ONLY			
DOCUMENT #	P9900010			STRE	ET ADDRESS			<u> –                                  </u>	%		
NAME	TAB PROPERTIES, INC. 2900 UNIVERSITY DRIVE CORAL SPRINGS FL 33065				<u></u>	<u></u>					
STREET ADDRESS CITY-ST-ZIP				CITY	04/01/0301023019 **150.00				<sup>)</sup>  8		
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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 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 execute this report as required by Chapter 620, Florida Statutes