


2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0010232 AT

DOCUMENT # A01000000733

1. Entity Name
VARKAS FAMILY PARTNERSHIP, LTD.



FILED
03 JAN 29 PM 12:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**155 OCEAN LANE DR., APT. 311
KEY BISCAIYNE FL 33149**

Mailing Address
**155 OCEAN LANE DR., APT. 311
KEY BISCAIYNE FL 33149**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

DUE BY MAY 1, 2003

4. FEI Number **65-1108440**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

VARKAS, ALEXANDER D JR.
199 OCEAN LANE DRIVE, APARTMENT 1100
KEY BISCAIYNE FL 33149

7. Name and Address of New Registered Agent

Name **(Same)**

Street Address (P.O. Box Number is Not Acceptable)
155 Ocean Lane Drive
APARTMENT 311

City **Key Biscayne** FL Zip Code **33149**

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 *Alexander D. Varkas, Registered Agent* DATE **1/18/03**

9. Capital Contributions as Shown on record. **\$1,331,632.00**

10. Amount of Capital Contributions in FLORIDA to date. **1,331,632.00**

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	
DOCUMENT #	P01000049286
NAME	FULCRUM, INC.
STREET ADDRESS	155 OCEAN LANE DR., APT. 311
CITY-ST-ZIP	KEY BISCAIYNE FL 33149
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	
CITY-ST-ZIP	30001 1195173
STREET ADDRESS	01/23/03--01102--010 **526.25
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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: *Alexander D. Varkas, Director Fulcrum Inc* DATE **1/18/03** DAYTIME PHONE # **1-561-392-1230**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CR2E003 (10/02)