2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A0100001186 1. Entity Name JARONAL EAST-WEST LTD.						SECRETARY OF STATE BIVISION OF CORPORATIONS 02 APR -2 AM 10: 43			9932 AB
Principal Place of Business 600 CENTRAL AVENUE. SUITE 365 HIGHLAND PARK IL 60035			Mailing Address 600 CENTRAL AVENUE. SUITE 365 HIGHLAND PARK IL 60035			11881811			111
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2002			
City & State			City & State			4. FEI Number		Applied For	
Zip Country		untry	Zip Coun		try		f Status Desired	\$8.75 Additional Fee Required	
	6. Name and	Address of Current Re	gistered Agent			7. Name and A	ddress of New Registere	d Agent	_
FEIAIRD IAV					Name				
FELNER, JAY 4182 LIVE OAK BLVD.					Street Address (P.O. Box Number is Not Acceptable)				
DELRAY BEACH FL 33445									
OCOM D	LACITIC SOFT	,			City		F	Zip Code	\dashv
8. The above	named entity sub	mits this statement for th	e purpose of changir	ng its registere	ed office or registe	ered agent, or both	, in the State of Florida.	1	
SIGNATURE.	Signature, typed or print	ed name of registered agent and	itle if applicable.				; DAT		
9. Capital Contributions as Shown on record. \$10,000.00 In FLORIDA to display to the state of th				to date.	\$1,2	03,293.00		FOR FEE INFORMATION	
	A GENE NOTE: Ge	RAL PARTNER THA	AT IS A BUSINESS NOT be changed (S ENTITY M on the form	IUST BE REGIS n; an amendme	STERED AND A ent must be filed	CTIVE WITH THIS OFF I to change a general	ICE. partner.	
12.		GENERAL PARTNER IN		13.			ADDRESS CHANGES (二、
OCUMENT # F0000005951 FELNER REALTY CORP.		TY CORP.			EET ADDRESS .				22E003 (9/01)
STREET ADDRESS CITY-ST-ZIP 600 CENTRAL AVENUE, SUITE HIGHLAND PARK IL 60035			365		'-ST-ZIP	·			
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STREET ADDRESS CITY-ST-ZIP		/			/-ST-ZIP	<u></u>			
14. I hereby of indicated	certify that the info	rmation supplied with th ue and accurate and the	is filing does not qual at my signature shall l	lify for the exe have the sam	emption stated in S le legal effect as if	Section 119.07(3)(i) made under oath;	, Florida Statutes. I further that I am a General Partne	certify that the information of the limited partnersh	in ip or

the receiver or trustee empoyered to execute this report as required by Chapter 620, Florida Statutes

February SIGNATURE: Nathan Wagner, Treas. 3/6/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

(847) 432-3666

Daytime Phone #

SINFLE CHECK HENR