

2002 UNIFORM BUSINESS REPORT (UBR)

0012042 AT

DOCUMENT # A01000001287
 Entity Name
YE FAMILY PARTNERSHIP LTD.

FILED
 02 JAN 30 PM 12:53
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



Principal Place of Business
 C/O HEDAYATOLLA ZAGHI
 7538 CHESTER TERRACE
 BOCA RATON FL 33433

Mailing Address
 C/O HEDAYATOLLA ZAGHI
 7538 CHESTER TERRACE
 BOCA RATON FL 33433

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, 2002

4. FEI Number
 65-1148294

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

6. Name and Address of Current Registered Agent

ZAGHI, HEDAYATOLLAH
 7538 CHESTER TERRACE
 BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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

9. Capital Contributions as Shown on record. \$4,000.00

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P99000101824	STREET ADDRESS	
NAME	GENESIS Z CORP.	CITY-ST-ZIP	
STREET ADDRESS	7538 CHESTER TERRACE		
CITY-ST-ZIP	BOCA RATON FL 33433		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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CITY-ST-ZIP			

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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: \$27.02 561 393 7355

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)