

LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

02 MAY 30 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A01000001604
1. Entity Name

I & E LIMITED PARTNERSHIP

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8295 W 20th AVE

3. Mailing Address

P.O. Box 4788

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

City & State

HIALEAH, FL

City & State

HIALEAH, FL

4. FEI Number

65-1157411

Applied For

Not Applicable

Zip

33014

Country

USA

Zip

33014

Country

USA

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

HERMAN, ROBERT M

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

8751 W BROWARD BLVD SUITE 109

City

PLANTATION

FL

Zip Code

33324

**DO NOT WRITE
IN THIS SPACE**

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.

ROBERT M. HERMAN

5/28/02

DATE

9. Capital Contributions

as Shown on record.

\$900.00

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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
	STEPHEN DANIS	8295 W 20th AVE HIALEAH, FL 33014	288885725782-4 -06/07/02--01052--007 ***150.00 ***150.00
			Ap 150
			DO NOT WRITE IN THIS SPACE

CR2E003B (12/01)

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:  4/29/02 305-822-6901

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER