

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

FILED

DOCUMENT # A01000001637

1. Entity Name

SREV MAYFAIR FLORIDA, LIMITED PARTNERSHIP

02 MAR 25 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

MJH

2. Principal Place of Business 1251
Ave of the Americas

3. Mailing Address 1251
Ave of the Americas

Suite, Apt. #, etc.
36th Floor

Suite, Apt. #, etc.
36th Floor

City & State
New York, NY

City & State
New York, NY

Zip
10020

Country
USA

Zip
10020

Country
USA

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number
01-0549822

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name
NRAI Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)
526 E. Park Avenue

City
Tallahassee

FL Zip Code
32301

**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.

DATE

9. Capital Contributions
as Shown on record. 99,000

10. Amount of Capital Contributions
in FLORIDA to date. -0-

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 # P01000118213
NAME SREV Mayfair Florida, Inc.
STREET ADDRESS 1251 Ave of the Americas
CITY-ST-ZIP New York, NY 10020

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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CITY-ST-ZIP

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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

By: SREV Mayfair Florida, Inc.

SIGNATURE:

Ellen Baron

2/14/02

212-408-8929

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003B (12/01)

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IN THIS SPACE**

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