2003 LIMITED PARTNÉRSHIP UNIFORM BUSINESS REPORT (UBR)								
DOCUMENT # A0200000263 1. Entity Name EAST LAS OLAS, LTD.					FILED 03 MAY 20 PN 1: 30			
Principal Place of Business 200 EAST LAS OLAS BLVD SUITE 1660 FT. LAUDERDALE FL 33301			Mailing Address 200 EAST LAS OLAS BLVD SUITE 1660 FT. LAUDERDALE FL 33301		SECRETARY OF STATE TALLAMASSEE, FLORIDA			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.		DUE BY MAY 1, 2003			
City & State			City & State		4. FEI Number Applied For Not Applicable			
Zip		Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required			
	6. Name a	and Address of Current	Registered Agent		7. Name and Address of New Registered Agent			
F&L CORF	P.			Name Dou	uglas K. Bischoff, Esq.			
	P. A.STREET_N	IORTH		Street Add	uglas K. Bischoff, Esq.			
200 LAUR				200	uglas K. Bischoff, Esq. Gress (P.O. Box Number is Not Acceptable) DEast Las Olas Blvd. ite 1660			
200 LAUR JACKSON	A.STREET_N VILLE FL 32	202		Street Add 200	Cress (P.U. Box Number is Not Acceptable) DEAST LAS Olas Blvd. ite 1660 Ct Lauderdale FL 293361			
200 LAUR JACKSON 8. The above the obligat	A.STREET_N VILLE FL 32	202	r the purpose of changing its	Street Add 200	D East Las Olas Blvd. ite 1660			
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200 LAUR JACKSON 8. The above the obligat SIGNATURE - 9. Capital Co	named entity ions of register on record.	submissibilis statement for red (shift) which will be red (shift) with the red (shift) are of registered gent a \$1,000,000.00 ENERAL PARTNER T	and title if applicable 10. Amount of Capite in FLORIDA to de THAT IS A BUSINESS EN Y NOT be changed on the	Street Act 200 Sui CityFor registered office or re al Contributions ate. TITY MUST BE R	The second of the state of Florida. I am familiar with, and accept the second of the second of the state of Florida. I am familiar with, and accept the second of the second of the second of the state of Florida. I am familiar with, and accept the second of the second			
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	12	GENERAL PARTNER INFORMATION	13.	600016337876 05/20/03-01054-002 **88.75	
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	DOCUMENT / NAME STREET ADDRESS		STREET ADDRESS	600016337876 04/21/0301005009 **437.50	
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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: