

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0011316 AT

DOCUMENT # A02000000463



1. Entity Name
BARDELS PROPERTIES, LLP

Principal Place of Business
3930 INVERRARY BLVD.
SUITE 201
LAUDERHILL FL 33319

Mailing Address
3930 INVERRARY BLVD.
SUITE 201
LAUDERHILL FL 33319

FILED
03 MAR -4 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, 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

03-0417593

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES INC.
ONE SOUTHEAST THIRD AVE. SUITE 2800
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name WEINSCHNEIDER SIDNEY
Street Address (P.O. Box Number is Not Acceptable)
3930 INVERRARY BLVD.
Suite 201
City LAUDERHILL FL Zip Code 33319

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Sidney Weinschneider*

Signature, typed or printed name of registered agent and title if applicable.

X 2/28/03

DATE

9. Capital Contributions
as Shown on record.

\$100.00

10. Amount of Capital Contributions
in FLORIDA to date.

100.00

11. MAKE CHECK PAYABLE TO FL. 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 # L02000006321
NAME BARDELS INVESTMENTS, LLC
STREET ADDRESS 3930 INVERRARY BLVD.
CITY-ST-ZIP LAUDERHILL FL 33319

DOCUMENT #
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CITY-ST-ZIP

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CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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

SIGNATURE: *Sidney Weinschneider*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE