

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A02000000740

1. Entity Name
EL RANCHO VERDE #3, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 APR 18 PM 4:25

Principal Place of Business
102 N. SWINTON AVE.
DELRAY BEACH, FL 33444

Mailing Address
102 N. SWINTON AVE.
DELRAY BEACH, FL 33444

2. Principal Place of Business

3. Mailing Address

300 S Pine Island Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

110

City & State

City & State

Plantation, FL

Zip

Country

Zip

Country

33324

DUE BY MAY 1, 2003

4. FEI Number

95-2623156

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WEINER, MICHAEL S ESQ
WEINER & ARONSON, P.A.
102 NORTH SWINTON AVE.
DELRAY BEACH, FL 33444

7. Name and Address of New Registered Agent

Name Steven P Fischer
Executive Secretary & Manager, Inc.
Street Address (P.O. Box Number is Not Acceptable)
300 S Pine Island Rd #110

City

Plantation

FL

Zip Code

33324

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

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

DATE

4/11/03

9. Capital Contributions

as Shown on record. \$0.00

10. Amount of Capital Contributions

in FLORIDA to date.

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

13. ADDRESS CHANGES ONLY

DOCUMENT # F02000002366
NAME JENNIE TOO, INC.
STREET ADDRESS 1369 BROADWAY, ROOM 520
CITY-ST-ZIP NEW YORK, NY 10018

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/11/03

937 370 0302

STAPLE CHECK HERE

CR2E003 (10/02)