2003 LIMITED PARTNERSHIP

UNIFORM BUSINESS REPORT (UBR)											
DOCUMENT # A0200000887 1. Entity Name THE VANCE INVESTMENTS LIMITED PARTNERSHIP							FILED				
								03 MAY 30 AM 8:00			
Principal Place of Business 4049 S.W. 7TH ST. PLANTATION FL 33317			Mailing Address C/O STEPHEN AND ROBIN VANCE 4049 S.W. 7TH ST. PLANTATION FL 33317				SEGRETARY OF STATE				
2. PrincipalePlace of Business				3. Mailing Address				SII BDIID IIBII ABIII BBIII BBI	H BURN YU	215 BB105 16141 30111 1801 1801	
Suite, Apt. #, etc.				Suite, Apt. #, etc.			DUE BY MAY 1, 2003				
City & State				City & State			4. FEI Number Applied For S1-0415091 Not Applicable				
Zip	Zip Country				Coun	try	5 Certificate of Status Desired \$8.75 Additional				
6. Name and Address of Current I				ed Agent			7. Name and Address of New Registered Agent				
						Name					
WACHS, JEFFREY S ESQ. 1177 S.E. 3RD AVE.						- Street Address (P.O. Box Number is Not Acceptable)					
FORT LAUDERDALE FL 33316							· ·				
						City	City FL Zip Code				
The above named entity submits this statement for the purpose of changing its registered office of the purpose of changing its registered office of the purpose of changing its registered office of the purpose of changing its registered of the purpose							ered agent, or both	in the State of Florida.		amiliar with, and accept	
the obligations of registered agent.											
SIGNATURE -	Cinnatura t and		Un adala		<u>-</u>	<u>.</u>		DATE			
Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions \$0.00 10. Amount of Capital					d Contrib					TO FL. DEPT. OF STATE	
as Shown on record. in FLORIDA							SEE REVERSE SIDE FOR FEE INFORMATION				
A GENERAL PARTNER THAT IS A BUSINESS EN NOTE: General Partners MAY NOT be changed on t											
12. GENERAL PARTNER INFORMATION					13.	· · · · · · · · · · · · · · · · · · ·		ADDRESS CHANGE			
DOCUMENT # NAME	VANCE, S	TEPHEN A				ET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	4049 S.W. 7TH ST. PLANTATION FL 33317				CiTY	-ST-ZIP					
DOCUMENT #	VANCE, ROBIN J				CIDE	ET ADDOCCO	90: 04/25/0	901799(030104602		15 *141.25	
NAME STREET ADDRESS					SINE	ET ADDRESS			.c. *	*141.25	
CITY-ST-ZIP		ON FL 33317	CIT			-ST-ZIP					
DOCUMENT # NAME					STRE	ET ADDRESS				}	
STREET ADDRESS CITY-ST-ZIP					CITY	-ST-ZIP	 				
DOCUMENT #				<u></u>	STRE	ET ADDRESS					
NAME Street address					CITY	-ST-ZIP				· ·	
CITY-ST-ZIP DOCUMENT #	<u></u>				_						
NAME					STRE	ET ADDRESS	·	<u></u>			
STREET ADDRESS CITY-ST-ZIP					CITY-	-ST-ZIP					
DOCUMENT # NAME					STRE	ET ADDRESS					
STREET ADDRESS			•		1	-					

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

CITY-ST-ZIP

SIGNATURE:

プトト

CITY-ST-ZIP