

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0001369 AV

DOCUMENT # A02000001507

1. Entity Name
SOUTH BEACH BOCA BUILDERS LTD.



FILED

03 MAY 28 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
2665 S. BAYSHORE DRIVE STE. 703
MIAMI FL 33133

Mailing Address
2665 S. BAYSHORE DRIVE STE. 703
MIAMI FL 33133

2. Principal Place of Business
1746 Meridian Ave
Suite, Apt. #, etc.
4

3. Mailing Address
1746 Meridian Ave
Suite, Apt. #, etc.
4

DUE BY MAY 1, 2003

City & State
Miami Beach, FL
Zip 33139 Country DADE

City & State
Miami Beach, FL
Zip 33139 Country DADE

4. FEI Number
13-4230451

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WORLD CORPORATE SERVICES, INC.
2665 S. BAYSHORE DRIVE STE. 703
MIAMI FL 33133

7. Name and Address of New Registered Agent

Name EDUARDO MOSES
Street Address (P.O. Box Number is Not Acceptable)
1746 Meridian Ave 4
City Miami Beach FL Zip Code 33139

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

9. Capital Contributions
as Shown on record. \$1,000.00

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

DOCUMENT # L020000030772
NAME INTERNATIONAL MANAGEMENT & INVESTMENT GROU
STREET ADDRESS 2665 S. BAYSHORE DRIVE STE. 703
CITY-ST-ZIP MIAMI FL 33133

13. ADDRESS CHANGES ONLY

STREET ADDRESS 1746 Meridian Ave Apt 4
CITY-ST-ZIP Miami Beach, FL 33139

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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 REQUIRED

4-16-03 3055329763

Date

Daytime Phone #

CR2E003 (10/02)