

# 2002 UNIFORM BUSINESS REPORT (UBR)

001708 AT

**DOCUMENT # A03415**

1. Entity Name  
**TANBROCO, LTD.**

FILED

02 JAN 14 AM 10:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business      Mailing Address

**113 GULFSTREAM ROAD**      **113 GULFSTREAM ROAD**  
**NORTH PALM BEACH FL 33408**      **NORTH PALM BEACH FL 33408**



2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

**DUE BY MAY 1, 2002**

4. FEI Number **59-6225601**      Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**TANEN, NATHAN**  
**861 LAKESIDE DR.**  
**NORTH PALM BEACH, FL FL 33408**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City      **FL**      Zip Code

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record.      **\$1,000.00**      10. Amount of Capital Contributions in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO 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 #	<b>TANEN, MELVIN</b> <b>113 GULFSTREAM RD.</b> <b>NORTH PALM BEACH FL</b>	STREET ADDRESS	<b>600004778566 6</b> <b>-01/16/02--01069--012</b> <b>***141.25 ***141.25</b>
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #	<b>TANEN, NATHAN</b> <b>861 LAKESIDE DR.</b> <b>NORTH PALM BEACH FL</b>	STREET ADDRESS	
NAME		CITY-ST-ZIP	
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CITY-ST-ZIP			

CP2E003 (9/01)

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: *Melvin W. Tanen*      **MELVIN W. TANEN**      1/10/02      561-627-8061

SIGNATURE AND TYPE PRINTED NAME OF SIGNING GENERAL PARTNER      Date      Daytime Phone #