

# 2001 UNIFORM BUSINESS REPORT (UBR)

0013600 AF

APPROVED  
AND  
FILED

01 MAY -1 PM 6:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

DOCUMENT # A05088

1. Entity Name

SES GROUP - PACKWOOD, LTD.

Principal Place of Business

9460 FONTAINEBLEAU BLVD.  
LEASING OFFICE  
MIAMI FL 33172

Mailing Address

P.O. BOX 56-1108  
MIAMI FL 33256-1108

2. Principal Place of Business

1794 Victoria Pt Cir  
Suite, Apt. #, etc.

3. Mailing Address

PO Box 25-7775  
Suite, Apt. #, etc.

City & State

Weston FL

City & State

Weston FL

4. FEI Number

59-1729900

Applied For

Not Applicable

Zip

33327

Country

Zip

33326

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SIMON, GARY

9100 S DADELAND BLVD.

#504

MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

Melissa Rice

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

1794 Victoria Pt Cir

City

Weston

FL

Zip Code

33327

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

*Melissa Rice*

4-20-01

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

(NOT: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions  
as Shown on record.

\$527,000.00

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

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

JONES, ROBERT C.  
9460 FONTAINEBLEAU BLVD.  
MIAMI FL 33172

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

NAME

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NAME

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

PO Box 2474

CITY - ST - ZIP

Naples FL 34106

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

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\*\*\*\*526.25 \*\*\*\*526.25

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:

*Robert C. Jones*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-20-01

Date

954 661 6240

Daytime Phone #

CR2E003 (11/00)