## 2000 UNIFORM BUSINESS REPORT (UBR)

HOTELERAMA ASSOCIATES, LTD.  Principal Pace of Susings 441 COLING ANE 57E 45-46  441 COLING ANE 57E 45-46  Coly & State  Cry & State  C	DOCUMENT # A06377  1. Entity Name			FILED	
Procept Place of Susinists  4441 COLUNS ANE  ST 455-465  IMMN BEACH FL 33140  2. Principal Place of Business  Sufe, Apt F, etc.  City & State	•			SECRETARY OF STATE	
Procepting Pieces of Business 4441 COLINS ANE 515 46-245 MAMI BEACH FL 3340  2. Principle Place of Business  Suite, April 4, ricit.  Suite, April 4, r		:		MAISION OF CONFORMATIONS	
Suite, Apt. #, etc.  Suite, Ap	Principal Place of Business 4441 COLLINS AVE. STE 452-456	Mailing Address 4441 COLLINS AVE. STE 452-456	227	00 FEB - ( AM (0: 33	
City & State  Country  City & State  Country  City & State	2. Principal Place of Business	3. Mailing Address		ויפר התנוס אופרוס היומנים הומרע הוסלים ויסטי אניספר ינותון סיפונים סוניסס ונוסו גוסווסבו ר	
SP-18US/24  Zip Country S. Certificate of Satus Desired Status	Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
S. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  Fee Required  FrankTaMAN, JEFFREY  441 COLINS AVENUE  Street Address (PO. Box Number is Not Acceptable)  Street Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  The above named entity submits this statement for the purpose of charging its registered diffice or registered agent, or both, in the State of Fonds.  SIGNATURE  Signature, listed or private name of registered agent with a registered Agent of Capital Contributions  Signature  Signature  Signature  Signature  A GENERAL PARTINER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  NOTE: General Partners MAN FOOT be changed on the form; an amendment must be filled to change a general partner.  CENERAL PARTINER INFORMATION  13.  ADDRESS CHANGES ONLY  SIRET ADDRESS  CITY ST. Zip  MAMI BEACH FL  SIRET ADDRESS  GTY-ST-Zip  MAMI BEACH FL  SIRET ADDRESS  GTY-ST-Zip  SIRET ADDRESS  GTY	City & State City & State			4. FEI Number 59-1805724 Applied For Not Applied For	
FRANTZMAN, JEFFREY 4441 COLLINS AVENUE STE 452-458 MIAMI BEACH FL 33140  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  SIGNATURE  9. Captual Contributions 37,905,693-36  10. Ancount of Capital Contributions 37,905,693-36  10. Ancount of Capital Contributions 37,905,693-36  11. MAKE CHICK PAYABLE TO DEPT: OF STATE REQISTERED AND ACTIVE WITH THIS OFFICE.  NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner.  TOWNED  STRET ADDRESS  OTY-ST-2P  DOUMENT / NAME STRET ADDRESS  OTY-ST-2P  DOUBLE / NAME STRET ADDRESS  OTY-ST-2P  D		Zip	Country	5. Certificate of Status Desired  \$8.75 Additional Fee Required	
FRANTZMAN, JEFFREY 4441 COLLINS AVENUE SITE 452-458 MIAMI BEACH FL 33140  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  9. Capital Contributions \$7,905,693.36  10. Amount of Capital Contributions \$5,900.693.36  10. Amount of Capital Contributions \$5,900.693.36  11. MAKE CHECK PRYABLE TO DEPT. OF STATE SER EVERSE SIDE FOR FEE INFORMATION  A GENERAL PARTINER 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 filled to page a general partner.  GENERAL PARTINER INFORMATION  13. ADDRESS CHANGES ONLY  GENERAL PARTINER INFORMATION  STRETADORSS  OTY-51-29  DOOMENT  NAME  STRETADORSS  OTY-51-29  DOOMENT  NAME  STRETADORSS  OTY-51-29  DOOMENT  NAME  STRETADORSS  OTY-51-29  DOOMENT  NAME  STRETADORSS  OTY-51-29  DOOMENT  STRETADORSS  OTY-51-29  DOOMENT  NAME  STRETADORSS  OTY-51-29  DOOMENT  STRETADORSS  OTY-51-29	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent	
MIAMI BEACH FL 33140  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  SIGNATURE  General, upper or princed name of registered apen and talls if applicable.  WOTE Registered agent, or both, in the State of Florida.  OCIT  General, upper or princed name of registered apen and talls if applicable.  WOTE Registered agent, or both, in the State of Florida.  SIGNATURE  GENERAL PARTINER 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 filled to change a general partner.  12. GENERAL PARTINER INFORMATION  TODOLOGIST IN THE COLUMN AND TO STREET ADDRESS IN THE REGISTERED AND ACTIVE WITH THIS OFFICE.  NOW CORPORATION  TOWN CORPORATION  TOWN CORPORATION  TOWN CORPORATION  TOWN CORPORATION  WAY STREET ADDRESS  GITY-ST-2P  TOWN ST-2P  TOWN	•	ရသည်ကို မေးကြောင့် သည်သည်။ ကြောင့်			
8. The above named entity submits this statement for the purpose of changing its registared office or registared agent, or both, in the State of Florida.  SIGNATURE  9. Capital Contributions \$7,905,693.36 10. Amount of Capital Contributions as Shown on record.  10. Amount of Capital Contributions SF 7,905,693.36 10. Amount of Capital Contributions as Shown on record.  11. MAKE CHECK PAYABLE TO DEPT. OF STAT As Shown on record.  12. CEMERAL PARTINER 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 filled to change a general partner.  12. GENERAL PARTINER INFORMATION  13. ADDRESS CHANGES ONLY  MAME STIRET ADDRESS  OTY-ST-2P  MAMIL BEACH FL  STRET ADDRESS  OTY-ST-2P  DOOLMENT / NAME  STRET ADDRESS  OTY-ST-2P  DOOLMENT / NAME  STRET ADDRESS  OTY-ST-2P  DOOLMENT / NAME  STRET ADDRESS  OTY-ST-2P  DOOLMENT / STRET ADDRESS  OTY-ST	STE 452-456				
SIGNATURE  9. Capital Contributions \$7,905,693.36  10. Amount of Capital Contributions in FLORIDA to date.  11. MAKE CHEEK PAYABLE TO DEPT. OF STATA SEE REVERSE SIDE FOR FEE INFORMATION  NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.  12. 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  SIRET ADDRESS  OITY-ST-2P  MAMIL BEACH FL  SIRET ADDRESS  OITY-ST-2P  DOUMENT / ST-2P  SIRET ADDRESS  OITY-ST-2P  DOUMENT / ST-2P  SIRET ADDRESS  OITY-ST-2P  ALL In prept is true and adcurate and the principled by Companieure shall have the same legal offect as if made under cath; that I am a General Partner of the limited partner the force-bert or trusted employeed to excurate the same legal offect as if made under cath; that I am a General Partner of the limited partner the frace-bert or trusted employeed to excurate and the partner the force-bert or trusted employeed to excurate and the partner the force-bert or trusted employeed to excurate and the partner the force-bert or trusted employeed to excurate a	MIAMI BEACH FL 33140		City	FL Zip Code	
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	STREET ADDRESS		CITY-ST-ZIP		
SIGNATURE: SYMPHEREQUIRED 1/2/00 (3-1) 535-3272	1. 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 may signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership the receiver or trustee empowered to execute this apport as required by Chapter 620, Florida Statutes				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #					