| !                  |                          |
|--------------------|--------------------------|
| <b>2001 UNIFO</b>  | RM BUSINESS REPORT (UBR) |
| DOCUMENT #         | A07325                   |
| TEMPLE COURT ASSOC | MATES, LTD.              |

| 1. Entity Name   |  |                                       |                            | बार अवस्तुर्हेटर् ।<br>-  |  |
|--|--|---------------------------------------|----------------------------|---|--|
| TEMPLE COURT ASSOCIATES, LTD.  |  |                                       |                            | FILED   |  |
| Principal Place of Business C/O MARTIN FINE. ESO.///HOLLAND & KNIGHT 701 BRICKELL AVE #3000 MIAMI FL 33131 MIAMI FL 33131 MIAMI FL 33131 |  |                                       |                            | 01 JUL 30 AM 8:47 SECRETARY OF STATE  |  |
|  | 2. Principal Place of Business Clotoccano - Knisht 701 BRICKE            |                                       |                            | - I FEBUATI IBUI BAKKI KABBA TUKKA MABU BUTI BUBUI BSBSU BUBUI BUBUI BUBUI BUBUI BUBU |  |
| Suite, Apt.  | Suite, Apt. #, etc.  Same Suite, Apt. #, etc.  30 # Fv.                  |                                       |                            | DUE BY SEPTEMBER 26, 2001   |  |
| City & Sta   | City & State City &  |                                       |                            | 4. FEI Number 59-1989719 Applied For Not Applicable                                   |  |
| Zip  | Country  | Zip<br>33/3/                          | Country SA.                | 5. Certificate of Status Desired S8.75 Additional Fee Required                        |  |
|  | 6. Name and Address of Current   | <del></del>                           |                            | 7. Name and Address of New Registered Agent   |  |
| FINE, MA   | FINE, MARTIN ESQUIRE  C/O HOLLAND AND KNIGHT  Name  Street Ad            |                                       |                            |   |  |
| 1  |  |                                       |                            | Street Address (P.O. Box Number is Not Acceptable)                                    |  |
| <b>I</b>   | KELL AVE., #3000   |                                       |                            |   |  |
| MIAMI FL   | 33131<br>!   |                                       | City                       | : FL Zip Code   |  |
| SIGNATURE  9. Capital Co as Shown  | on record.   | 10. Amount of Capita in FLORIDA to da | ite.                       | 11. MAKE CHECK PAYABLE TO DEPT. OF STATE<br>SEE REVERSE SIDE FOR FEE INFORMATION      |  |
|  |  |                                       |                            | STERED AND ACTIVE WITH THIS OFFICE.  ent must be filed to change a general partner.   |  |
| 12.  | GENERAL PARTNER  | RINFORMATION                          | 13.                        | ADDRESS CHANGES ONLY  |  |
| NAME STREET ADDRESS CITY-ST-ZIP  | TEMPLE COURT GP/MF, INC.<br>C/O HOLLAND&KNIGHT, 701 BR<br>MIAMI FL 33131 | ICKELL AV.,#3000                      | STREET ADDRESS CITY-ST-ZIP |   |  |
| DOCUMENT #   | M60489  <br>TEMPLE COURT GP, INC.  | ICVELL AV #0000                       | STREET ADDRESS             | 2000045145887   |  |
| STREET ADDRESS CITY-ST-ZIP   | C/O HOLLAND&KNIGHT, 701 BR<br>MIAMI FL 33131                             |                                       | CITY-ST-ZIP                | -08/03/0101033001<br>****551.75 ****551.75  |  |
| DOCUMENT #   |  |                                       | STREET ADDRESS             | ***************************************   |  |
| STREET ADDRESS CITY-ST-ZIP   |  |                                       | CITY-ST-ZIP                |   |  |
| DOCUMENT #   | 1  |                                       | STREET ADDRESS             |   |  |
| STREET ADDRESS  CITY-ST-ZIP  |  |                                       | CITY-ST-ZIP                |   |  |
| DOCUMENT #   |  |                                       | STREET ADDRESS             | · · · · · · · · · · · · · · · · · · ·   |  |
| STREET ADDRESS CITY-ST-ZIP   | ,  |                                       | CITY-ST-ZIP                |   |  |
| DOCUMENT # NAME STREET ADDRESS   | ;  |                                       | STREET ADDRESS             |   |  |
| STREET ADDRESS   |  |                                       | CITY-ST-ZIP                |   |  |

I hereby certify that the information supplied with this riling does not quality, and the same legal effect as it made indicated on this report is true and accurate and that my signature shall have the same legal effect as it made the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: