

2002 UNIFORM BUSINESS REPORT (UBR)

0010062 AT

DOCUMENT # **A09256**

1. Entity Name

RUSS ALLEN PLAZA ASSOCIATES, LTD.

FILED

02 FEB -4 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**2828 CORAL WAY
PENTHOUSE SUITE
MIAMI FL 33145**

Mailing Address
**2828 CORAL WAY
PENTHOUSE SUITE
MIAMI FL 33145**



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number
13-3070195

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HERNANDEZ, ANGEL
2828 CORAL WAY
PENTHOUSE
MIAMI FL 33145**

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

DATE

9. Capital Contributions as Shown on record. **\$540,000.00**

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 # **848954**
NAME **AUGUST PROPERTIES CORP. I**
STREET ADDRESS **625 MADISON AVENUE**
CITY-ST-ZIP **NEW YORK NY**

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT # **617998**
NAME **THE RELATED COMPANIES OF FLORIDA, INC.**
STREET ADDRESS **2828 CORAL WAY PH-1**
CITY-ST-ZIP **MIAMI FL**

STREET ADDRESS
CITY-ST-ZIP

**500004917225--2
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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

ANGEL HERNANDEZ

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

VICE - PRESIDENT

1/15/02
Date

Daytime Phone #

CR2E003 (9/01)