


2001 UNIFORM BUSINESS REPORT-(UBR)

0005774 AF

DOCUMENT # A10078
 1. Entity Name
301 BUILDING, LTD.

FILED
 01 MAR 29 AM 11:12
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address
10729 S.W. 104 ST. **10729 S.W. 104 ST.**
MIAMI FL 33176 **MIAMI FL 33176**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country

4. FEI Number **59-2078290** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
FREUND, IRWIN
10729 S.W. 104TH STREET
MIAMI FL 33176

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. **\$168,000.00**

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	FREUND, IRWIN 10729 S.W. 104 ST. MIAMI FL 33176
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	FISHER, LAWRENCE 3111 UNIV DR. #720 CORAL SPRINGS FL 33030
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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13. ADDRESS CHANGES ONLY	
STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP	800003994218--2 -04/12/01--01063--004 ***526.25 ***526.25
STREET ADDRESS CITY-ST-ZIP	
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STREET ADDRESS CITY-ST-ZIP	

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: Irwin b Freund Date: 3/18/01
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

CR2E003 (11/00)