

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A11492

1. Entity Name

CHAPEL TRAIL, LTD.

FILED

00 MAR 27 PM 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

9000 SHERIDAN STREET
SUITE 130
PEMBROKE PINES FL 33024

Mailing Address

9000 SHERIDAN STREET
SUITE 130
PEMBROKE PINES FL 33024-8801

2. Principal Place of Business

21011 Johnson Street

3. Mailing Address

21011 Johnson Street

Suite, Apt. #, etc.

Suite 101

Suite, Apt. #, etc.

Suite 101

City & State

Pembroke Pines, Florida

City & State

Pembroke Pines, Florida

4. FEI Number

59-2140301

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KOENIG, PAUL
9000 SHERIDAN STREET
SUITE 130
PEMBROKE PINES FL 33024

7. Name and Address of New Registered Agent

Name

same

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

21011 Johnson Street

Suite 101

City

Pembroke Pines

FL

Zip Code
33029

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$2,975,903.00

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 # 305176
NAME SAJIK CORP.
STREET ADDRESS 9000 SHERIDAN ST. #130
CITY-ST-ZIP PEMBROKE PINES FL

13. ADDRESS CHANGES ONLY

STREET ADDRESS 21011 Johnson Street, Suite 101
CITY-ST-ZIP Pembroke Pines, Florida 33029

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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

Sajik Corp, its general Partner

SIGNATURE:

SIGNATURE REQUIRED

Michael A. Koenig, Vice President 2/7/00 954-436-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/99)