

2002 UNIFORM BUSINESS REPORT (UBR)

0001884 AV

DOCUMENT # **A11852**

1. Entity Name

NATTAR, LTD.

FILED

02 FEB 18 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

**8381 S.W. 92ND TERRACE
MIAMI FL 33156**

Mailing Address

**8381 S.W. 92ND TERRACE
MIAMI FL 33156**

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 **59-2175020**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required *

DUE BY MAY 1, 2002

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HERSHBEIN, ARTHUR

**8381 S.W. 92ND TERR
MIAMI FL 33156**

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.

\$10,500.00

10. Amount of Capital Contributions
in FLORIDA to date.

SAME

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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
**HERSHBEIN, ARTHUR
8381 S.W. 92ND TERR.
MIAMI FL**

STREET ADDRESS

CITY-ST-ZIP

400005044634--9

03/06/02 01009-001

*****162.25 ***162.25**

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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:

ARTHUR HERSHBEIN
Arthur Hershbein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

1/25/02

305-271-9136

CR2E003 (9/01)