## LIMITED PARTNERSHIP

APPROVE

U	NIFORM BUSIN	IESS REPORT	(UBR)		Añ Eu		بالم	e was	
DOCU	IMENT# A14333			FIL	たじ				
1. Entity Nar		0;	2 APR 29	PH 4: 55					
SAR	D.	SECRETARY OF STATE TALLAHASSEE, FLORIDA							
	DO NOT WRIT	E IN THIS SP	ACE			•			
	Place of Business ain Street	3. Mailing Address 1991 Main Stre	3. Mailing Address 1991 Main Street			DO NOT WRITE IN THIS SPACE			
Suite, Apt. #, etc. Suite 183		Suite, Apt. #, etc. Suite 183			DUE BY MAY 1				
City & Star		City & State			4. FEI Number			Applied For	
Sarasota, Florida		Sarasota, Florida			59-2281539 Not Applicable				
Zip 34236	Zip Country Zip		' '		5. Certificate of	f Status Desired	□ \$8	8.75 Additional e Required	
34236	USA	34236	USA	7	. Name and Ad	dress of Current Reg			
•					l, Steven		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>3</b>	
	Street A	Street Address (P.O. Box Number is Not Acceptable)							
				- Suite 183					
IN THIS SPACE									
			City Sa	arasot	<u>.</u>		FL	Zip Code 34236	
8. The above	e named entity submits this statement	for the purpose of changing its re				in the State of Florida	l.		
SIGNATURE	Signature, typed or printed name of registered age	ant and titla if annicable					DATE		
9. Capital Co	Contributions,			11. MAKE CHECK P		DEPT. OF STATE			
as Shown		10. Amount of Capital in FLORIDA to dat				SEE REVERSE S	SIDE FOR I	EE INFORMATION	
		RTHAT IS A BUSINESS ENT MAY NOT be changed on the						·   er.	
12.		ER INFORMATION							
DOCUMENT #	L39350		STREET ADDRESS						
NAME STREET ADDRESS	Sarasota Office & 1   222 Beach Road #3	Warehouse, Inc.					•		
CITY-ST-ZIP	Sarasota, FL 3424	2	CITY-ST-ZIP					,	
DOCUMENT #	Darasota, FB 3424		PTDEET ADODESS						
NAME			STREET ADDRESS		5	<u>000055</u>	502	4751 038009	
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP			-05/10/0	)201	038009 ****526_25	
DOCUMENT #			STREET ADDRESS			***** <u>**</u>	) <del>. 63</del>	**************************************	
NAME STREET ADDRESS						NOTIA	/ Po 1 Tr		
CITY-ST-ZIP			CITY-ST-ZIP	DO NOT WRITE					
DOCUMENT # NAME			STREET ADDRESS	·	IN	THIS SI	PACI		
STREET ADDRESS			CITY-ST-ZIP						
DOCUMENT #							<del></del>		
NAME			STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP						
DOCUMENT # NAME									
			STREET ADDRESS					l	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						

14. Dereby 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

Steve Band, Director of Sarasota Office and Warehouse,

SIGNATURE:

Inc., a Florida corp

4/12/02 (941) 366-6660