

# 2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

0004661 AF

DOCUMENT # **A19130**

1. Entity Name  
**FONTANAR PARK LIMITED PARTNERSHIP**

01 MAY -1 AM 11:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**540 N.W. 114TH AVENUE  
MIAMI FL 33172**

Mailing Address  
**6039 COLLINS AVE., #1537  
MIAMI BEACH FL 33140**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**6039 Collins Ave**

3. Mailing Address

Suite, Apt. #, etc.  
**1537**

City & State  
**Miami Beach, FL**

City & State

4. FEI Number **59-2496562**

Applied For  
 Not Applicable

Zip **33140** Country **Dade**

Zip Country

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

6. Name and Address of Current Registered Agent  
**CARRODEGUAS, VICENTE  
6039 COLLINS AVE., #1537  
MIAMI BEACH FL 33140**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **\$2,800.00**

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	<b>ZALDIVAR, FIDEL 540 N.W. 114TH AVENUE MIAMI FL 33172</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>P94000090568 DEKARON CORPORATION 540 N.W. 114TH AVENUE MIAMI FL 33172</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>CARRODEGUAS, VINCENTE 540 N.W. 114TH AVENUE MIAMI FL 33172</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	<b>3712 SW 136 Ave</b>
CITY-ST-ZIP	<b>Miami, FL 33175</b>
STREET ADDRESS	<b>6039 Collins Ave #1537</b>
CITY-ST-ZIP	<b>Miami Beach, FL 33140</b>
STREET ADDRESS	<b>6039 Collins Ave #1537</b>
CITY-ST-ZIP	<b>Miami Beach, FL 33140</b>
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<b>700004219707--2</b>
CITY-ST-ZIP	<b>-05/16/01 --01050--009 ****150.00 ****150.00</b>
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: **Vicente Carrodeguas** Date **4/25/01** (305) 323-2342  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

CR2E003 (11/00)