

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A19785

1. Entity Name

FJS PROPERTIES FUND I, L.P., LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 12 PH 4:40

Principal Place of Business
401 EXECUTIVE CENTER DR.
WEST PALM BEACH FL 33401

Mailing Address
401 EXECUTIVE CENTER DR.
WEST PALM BEACH FL 33401-2936



MJH

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 13-3252067

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LIEBOWITZ, MURRAY
2600 E COMMERCIAL BLVD. SUITE 213
FT. LAUDERDALE FL 33308

Name
BERMAN WOLFE RENNERT VOGEL & MANDLER, P.A.

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

Suite 3500

City
Miami

FL Zip Code
33131-2130

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

Jeffrey L. Mandler VP
Signature, typed or printed name of registered agent and title if applicable.

Jeffrey L. Mandler, VP
(NOTE: Registered Agent signature required when reinstating)

4/6/00
DATE

9. Capital Contributions
as Shown on record.

\$8,391,500.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P40997
NAME FJS PROPERTIES, INC.
STREET ADDRESS 264 ROUTE 537 EAST
CITY - ST - ZIP COLTS NECK NJ 07722

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
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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

SIGNATURE: *Murray Liebowitz* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/99)