2002	UNIFO	RM BUSI	NESS RE	PORT	r (UBR	D APPRO	:¥£: D		
DOCUMENT # A20898						FILE	ED		
JANMAR PROPERTIES, LTD., LLLP						02 APR 22	PM 3: 19		
JANMAN PROPERTIES, LID., LLLF							OF STATE		
Principal Place of Business Mailing Address						SEGRETANT TAUL AHASSI	EE, FEURIUM		
4649 PONCE DE LEON BLVD. 4649 PONCE DE LEON BLVD.									
SUITE 403 CORAL GABLES FL 33146 SUITE 403 CORAL GABLES FL 33146						· ,	111	 	BAN BARAN BARAN BARAN ARA
2. Principal Pl	ace of Business		3. Mailing Address 1001 NORTH US 1						
Suite, Apt. #, etc. Suite, Apt. #, etc						DUE BY MAY 1, 2002			
City & State			510 City & State			4. FEI Number	· · · · · · · · · · · · · · · · · · ·		Applied For
UPITER, FL			JUPITER, FI	L			59-2588569		Not Applicable
- Zip		untry	33477	1	ountry ARTIN	5. Certificate of	Status Desired		75 Additional Required
3477		RTIN Address of Current F					ddress of New Registere	d Ageni	1
					Name FR	REDERICK R. RILEY			
RAWLS, B.D. 4649 PONCE DE LEON BLVD.					Street Address (P.O. Box Number is Not Acceptable) 1001 NORTH US 1,				
SUITE 403					SUITE 510				
CORAL GABLES FL 33146					City JUPITER FL 33477				
3. The above	named entity subn	nits this statement fer	the puspose of stran	iging its regis		registered agent, or both,	in the State of Florida.		
	Page 1	Davies	K W.VW	γ				4/	دمام،
SIGNATURE _	Signature, typed or printe	d name of registered agent a		GEDERICE	K R. RIL	EY	DATE	7//	8/02
9. Capital Contributions as Shown on record. \$4,148,587.24 in FLORIDA to date							11. MAKE CHECK PAYAI SEE REVERSE SIDE	FOR FE	
	A GENE NOTE: Gen	RAL PARTNER T eral Partners MA	HAT IS A BUSINE Y NOT be change	SS ENTITY d on the fo	MUST BE Form; an ame	REGISTERED AND AC	TIVE WITH THIS OFF to change a general p	artner	•
12.	· · · · · · · · · · · · · · · · · · ·	GENERAL PARTNER	INFORMATION	1	13.		ADDRESS CHANGES C	NLY	
DOCUMENT# NAME	254801 JANMAR CORPORATION				STREET ADDRESS	1001 NORTH US 1, SUITE 510			
STREET ADDRESS CITY-ST-ZIP	ET ADDRESS 4649 PONCE DE LEON #403				CITY-ST-ZIP	JUPITER, FL 33477			
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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:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Date

Date

Dayting Phone *