

2002 UNIFORM BUSINESS REPORT (UBR)

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FILED

02 MAY -1 PM 1:11

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH



DOCUMENT # **A22067**
1. Entity Name **GROVE MARINA MARKET, LTD**

Principal Place of Business **2601 South Bayshore Dr. PH-1 MIAMI, FL 33133**
Mailing Address **2665 South Bayshore Dr. Suite 200 MIAMI, FL 33133**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

PAID BY MAY 1, 2002

4. FEI Number
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**O'NAGHTEN, JUAN T.
2665 South Bayshore Drive
Suite 200
MIAMI, FL 33133**

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 **4/29/02**
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **7,500.00**
10. Amount of Capital Contributions in FLORIDA to date. **7,500.00**
11. MAKE CHECK PAYABLE TO DEPT OF STATE SEE REVERSE SIDE FOR 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 #	N27325	STREET ADDRESS	
NAME	GROVE MARINA MARKET, INC.	CITY-ST-ZIP	800005507038--9
STREET ADDRESS	2601 S. Bayshore Dr. PH 1		-05/13/02--01086--013
CITY-ST-ZIP	MIAMI FL 33133		****150.00 ****150.00
DOCUMENT #		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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 **JUAN T. O'NAGHTEN** **4/29/02** **(305)**

CR2E003 (9/01)