

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A23329**

1. Entity Name.

DECOMA, LTD.

Principal Place of Business

**11 GREENWAY PLAZA
SUITE 3000
HOUSTON TX 77046**

Mailing Address

**11 GREENWAY PLAZA
SUITE 3000
HOUSTON TX 77046**

FILED

01 MAY -4 PM 12:17

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

501 E. Camino Real

Suite, Apt. #, etc.

Corporate Offices

City & State

Boca Raton, FL

Zip

33432

Country

3. Mailing Address

P. O. Box 5025

Suite, Apt. #, etc.

Corporate Offices

City & State

Boca Raton, FL

Zip

33431

Country

4. FEI Number

76-0197100

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**AMERICAN INFORMATION SERVICES INC.
801 BRICKELL AVE. 24TH FLOOR
MIAMI FL 33131**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$5,122,020.00

10. Amount of Capital Contributions
in FLORIDA to date.

5,122,020.00

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 # **G00091900332**
NAME **DECOMA VENTURE**
STREET ADDRESS **11 GREENWAY PLAZA STE. 3000**
CITY-ST-ZIP **HOUSTON TX**

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CITY-ST-ZIP

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CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS **501 E. Camino Real**

CITY-ST-ZIP **Boca Raton, FL 33432**

STREET ADDRESS
CITY-ST-ZIP

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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

Steven M. Dauria-Vice Pres/Treas

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Decoma Investments Inc. I

4/26/01

Daytime Phone #

561-447-5300