## 2002 UNIFORM BUSINESS REPORT (UBR)

A23957

DOCUMENT # A23957  1. Entity Name								FILED					
FIRST EQUITY ASSOCIATES, LTD.								02 FEB 13	PĦ	3: 33		;	
Principal Plac % P JONAS 8370 W FLAI MIAMI FL 33			Mailing Address % P JONAS 8370 W FLAGLER #125 MIAMI FL 33144			SECRETARY OF STATE TALLAHASSEE, FLORIDA							
Principal Place of Business     Address     Address													
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DUE BY MAY 1, 2002						
City & State			City & State				_4FEI.Number.	59-2807006		Applied I		-	
Zip Country			Zip	Zip Country			5. Certificate of	f Status Desired		Not Appli 8.75 Additional ee Required			
6. Name and Address of Current Registered Agent							_7. Name and A	ddress of New Regist	ered Ag	gent -			
JONAS, PETER, CPA						Name							
8370 W. FLAGLER ST.					Street Address (P.O. Box Number is Not Acceptable)								
SUITE 125													
MIAMI FL 33144					City				FL	Zip Code			
8. The above	named entity s	ubmits this statement for th	ne purpose of changing its	register	ed office o	r registere	ed agent, or both,	, in the State of Florida.		•			
SIGNATURE .	Signature, typed or p	printed name of registered agent and	title if applicable.						DATE		-		
9 Capital Contributions as Shown on record. \$470,400.00 In FLORIDA to date.					tributions			11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION					
-		NERAL PARTNER THA											
12.	13.	,	ADDRESS CHANGES ONLY										
DOCUMENT # NAME PAREIRA, ALAN S. 9130 S. DADELAND BLVD., #1704 MIAMI FL 33156				STRE	ET ADDRESS							9/01	
					-ST-ZIP	P				·		CR2E003 (9/01)	
DOCUMENT #	-BISHOPRIC	KARL		STRE	ET ADDRESS	WR	Hou 6-11-	IJ ST 257	z 0 —	-8ก-ระปี ฮั	tro	5	
STREET ADDRESS CITY-ST-ZIP  444 BRICKELL AVE. MIAMI FL 33131					-ST-ZIP	MI	AMI F	-L 3313	3 /			Ŧ.	
DOCUMENT #				STRE	et address				•	···			
STREET ADDRESS CITY-ST-ZIP	# 1 No = 12#	- 10-		CITY	-ST-ZIP		50	000502 -02/27/02	34	454 23015	1		
DOCUMENT # NAME				STRE	ET ADDRESS			****526.2	5 *	***526.25			
STREET ADDRESS CITY-ST-ZIP				CITY	-ST-ZIP								
DOCUMENT # NAME -				STRE	ET ADDRESS								
STREET AT HESS CITY-ST- IP (				CITY	-ST-ZIP			****					
DOCUMENT /				STRE	ET ADDRESS					·			
CITY-ST-ZIP			<b>(1)</b>		-ST-ZIP								
14. I hereby o	certify that the in	nformation supplied with this true and accurate and the	s filing does not qualify for	the exec	nption (tal	ted in Sec	tion 119.07(3)(i),	Florida Statutes. I furth	er certify	y that the informat	ion		