

2002 UNIFORM BUSINESS REPORT (UBR)

001780 AT

DOCUMENT # **A24448**

1. Entity Name

PALM BEACH COMMERCE CENTER ASSOCIATES, LTD.

FILED

02 FEB 13 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**6827 VISTA PARKWAY NORTH
WEST PALM BEACH FL 33411**

Mailing Address
**6827 VISTA PARKWAY NORTH
WEST PALM BEACH FL 33411**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number **59-2823168**

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

**RAZOOK, RICHARD J
ONE S.E. 3RD AVE., 17TH FLOOR
MIAMI FL 33131**

Name

RICHARD J. RAZOOK

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

800 BRICKELL AVENUE, SUITE 201

City

MIAMI

FL

Zip Code

33131

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

DATE

9. Capital Contributions
as Shown on record.

\$13,750,990.00

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 # **P96000037671**
NAME **PALMCOS II INC.**
STREET ADDRESS **ONE SOUTHEAST THIRD AVE., 17TH FLOOR**
CITY-ST-ZIP **MIAMI FL 33131**

STREET ADDRESS

800 BRICKELL AVE, SUITE 201

CITY-ST-ZIP

MIAMI, FL 33131

DOCUMENT # **P31949**
NAME **PALMCOS INC.**
STREET ADDRESS **ONE SOUTHEAST THIRD AVE., 17TH FLOOR**
CITY-ST-ZIP **MIAMI FL 33131**

STREET ADDRESS

800 BRICKELL AVE, SUITE 201

CITY-ST-ZIP

MIAMI, FL 33131

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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

[Signature] **January 28, 2002** (305) **808-7910**
Date Daytime Phone #

CR2E003 (9/01)