

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A 24973

1. Entity Name

Ocean Grande Beach Club, Ltd.

Principal Place of Business

Mailing Address

2. Principal Place of Business

Von-Hutten-Str. 16 a

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hamburg

City & State

4. FEI Number

59-2490120

Applied For

Not Applicable

Zip

22761

Country

GERMANY

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Claudio Riedi, Esq.

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

100 N. Biscayne Blvd., #2100

City

Miami

FL

Zip Code

33132

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

1/20/00

9. Capital Contributions as Shown on record.

\$40,000

10. Amount of Capital Contributions in FLORIDA to date.

\$40,000

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 #
NAME
STREET ADDRESS
CITY-ST-ZIP

Hollywood Beach Resorts, Inc.

STREET ADDRESS

Von-Hutten-Str. 16 a

CITY-ST-ZIP

Hamburg 22761 - GERMANY

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

600003677476--2

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

-02/13/01-01095-002

****368.75 ****368.75

DOCUMENT #
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CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

CR2E003 (11/00)

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:

GUNTER WOLCZIK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

23 JANUAR 2001

Date

Daytime Phone #

+49 40-894021