

2001 UNIFORM BUSINESS REPORT (UBR)

0006098 AF

DOCUMENT # **A27049**

1. Entity Name

THIRD STREET DEVELOPMENT, LTD.

Principal Place of Business

% GERALD W. GRITTER, ESQ.
100 N.E. 3RD AVE., SUITE 1100
FT. LAUDERDALE FL 33301

Mailing Address

% GERALD W. GRITTER, ESQ.
100 N.E. 3RD AVE., SUITE 1100
FT. LAUDERDALE FL 33301

01 FEB 15 AM 11:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

16 Northeast 4th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#110

City & State

City & State

Fort Lauderdale, FL

4. FEI Number

65-0070583

Applied For

Not Applicable

Zip

Country

Zip

Country

33301

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

**EMO CORPORATE SERVICES, INC.
100 N.E. THIRD AVE.
SUITE 1100
FT. LAUDERDALE FL 33301**

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.

\$3,030,000.00

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 # **P96000041990**
NAME **DANCU HOLDING, INC.**
STREET ADDRESS **16 NE 4TH ST**
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

STREET ADDRESS

CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Signature: [Signature] Norbert Kreyer (Pres.) 1-26-01 (954) 779-7103

Date

Daytime Phone #

CR2E003 (11/00)