

LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A 27403**
 1. Entity Name
200 NE. 3rd. Avenue Bank Ltd.

FILED
 02 MAR 11 PM 3:41
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
16 NE. 4th. Street
 Suite, Apt. #, etc.
 City & State
Fort Lauderdale FL.
 Zip
33301 Country
USA

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip
 Country

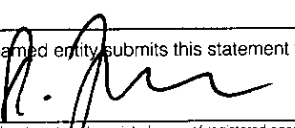
DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number
59-2590771
 Applied For
 Not Applicable
 5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
 Name **Euro Management Inc.**
 Street Address (P.O. Box Number is Not Acceptable)
16 NE. 4th. Street
Fort Lauderdale **FL** **33301**

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  **W. Kreyer** DATE **March-6-02**

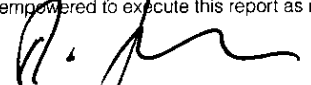
9. Capital Contributions as Shown on record **\$1,636,000.00** 10. Amount of Capital Contributions in FLORIDA to date.
 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

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		
DOCUMENT #	NAME	STREET ADDRESS
	STREET ADDRESS	
	CITY-ST-ZIP	
	Condor Management Inc.	
	16 NE. 4th. Street	
	Fort Lauderdale, FL. 33301	
		300005114793--9
		-03/19/02-01006-005
		****535.00 ****535.00
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	CITY-ST-ZIP	

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IN THIS SPACE**

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:  **W. Kreyer** 3-6-02 954-779-7103

CR2E003B (12/01)