

2001 UNIFORM BUSINESS REPORT (UBR)

0006379 AF

DOCUMENT # **A27406**

1. Entity Name

PREPPIES, LTD.

FILED
01 MAR 26 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**C/O PASSARIELLO & STAIANO
6466 N.W. 5TH WAY
FORT LAUDERDALE FL 33023**

Mailing Address

**C/O PASSARIELLO & STAIANO
6466 N.W. 5TH WAY
FORT LAUDERDALE FL 33023**

2. Principal Place of Business

2235 SE MIDPORT RD

3. Mailing Address

Suite, Apt. #, etc.

City & State

FT. ST. LUCIE

City & State

Zip

34952

Country

USA

Country

4. FEI Number

65-0090446

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SEGAL, MIKE
BROAD AND CASSEL, SUITE 3000
201 S. BISCAYNE BLVD
MIAMI FL 33131**

7. Name and Address of New Registered Agent

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.

\$171,471.00

10. Amount of Capital Contributions in FLORIDA to date.

\$171,471.00

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 # **K38729**
NAME **BJO, INC.**
STREET ADDRESS **1218 NE SAGO DR**
CITY-ST-ZIP **JENSEN BEACH FL 34957**

DOCUMENT # **K38747**
NAME **EGT, INC.**
STREET ADDRESS **518 N. RIVERPOINT DR.**
CITY-ST-ZIP **STUART, FL 33497 34994**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS **3305 S.W. Rivers End Way**
CITY-ST-ZIP **Palm City, FL 34990**

STREET ADDRESS
CITY-ST-ZIP **000003931380--4**

STREET ADDRESS
CITY-ST-ZIP **03/30/01--01058--001**
******526.25 ****526.25**

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
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]
Pres EGT Inc
General Ptnr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

3/22/01

Daytime Phone #

561 283 4433

CR2E003 (11/00)