

# 2002 UNIFORM BUSINESS REPORT (UBR)

0003303 AV

DOCUMENT # **A27703**

1. Entity Name

**PH PARTNERS LTD.**

**FILED**

**02 APR 18 PM 2:55**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

C/O ALAN B. WEISMAN  
55 EAST 59TH STREET, 11TH FLOOR  
NEW YORK NY 10022

Mailing Address

C/O SEVELL & DUNGAN Realty Partners, Inc  
2295 CORPORATE BLVD., NW, SUITE 131  
BOCA RATON FL 33431

2. Principal Place of Business

3. Mailing Address

to Sevell Realty Partners, Inc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2295 Corporate Blvd NW, Ste # 131

**DUE BY MAY 1, 2002**

City & State

City & State

Boca Raton, FL

4. FEI Number

13-2975089

Applied For

Not Applicable

Zip

Country

Zip

33431

Country

Yalton Beach

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

SEVELL REALTY PARTNERS INC.  
2295 NW CORPORATE BLVD., SUITE 125  
BOCA RATON FL 33431

Name

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

Suite # 131

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.

DATE

9. Capital Contributions as Shown on record.

**\$125,000.00**

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 #	WEISMAN, ALAN B. 930 PARK AVENUE NEW YORK NY	STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP		STREET ADDRESS	
DOCUMENT #	LICHTENSTEIN, MICHAEL 2350 N.E. 48TH COURT LIGHTHOUSE POINT FL	CITY-ST-ZIP	
NAME			
STREET ADDRESS			
CITY-ST-ZIP		STREET ADDRESS	
DOCUMENT #	IFSHIN, STEPHEN 420 WEST END AVENUE NEW YORK NY	CITY-ST-ZIP	
NAME			
STREET ADDRESS			
CITY-ST-ZIP		STREET ADDRESS	
DOCUMENT #		CITY-ST-ZIP	
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NAME			
STREET ADDRESS			
CITY-ST-ZIP		STREET ADDRESS	

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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 REQUIRED**

1-28-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)