## 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

## A28016 **DOCUMENT #**

1. Entity Name BROWARD GARDENS ASSOCIATES, LTD.



Principal Place of Business 818 W BROOKS AVE NORTH LAS VEGAS NV 89030 Mailing Address 818 W BROOKS AVE

NORTH LAS VEGAS NV 89030

03 MAY -2 PM 7: 53

SECRETARY OF STATE TALLAHASSEE FLORIDA

Principal Place of Business     3. Mailing Address					
Suite, Apt. #, etc.		Sulte, Apt. #, etc.		DUE BY MAY 1, 2003	
City & State		City & State		4. FEI Number 59-6921283	Applied For Not Applicable
Žip	Country	Zip	Country	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	d Agent

MAHHOOD, LYNN						
9951 ATLANTIC BLVD						
SUITE 440						
IACKEONIMILE EL 2003E						

JACKSUNVILLE FL 32225

<u>Green Dotson</u>

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

\$0.00

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. 1 am familiar with, and accept the obligations of registered agent.

SIGNATURE

as Shown on record.

Signature, typed or 9. Capital Contributions

\$0.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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	BIRD, ALLAN S.   818 W BROOKS AVE   NORTH LAS VEGAS NV 89030	STREET ADDRESS CITY-ST-ZIP					
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F9300001192 REAL PROPERTY SERVICES CORP. 818 W BROOKS AVE NORTH LAS VEGAS NV 89030	STREET ADDRESS  CITY-ST-ZIP	000017913910 05/02/0301106023 **150.00				
DOCUMENT # NAME STREET ADDRESS	NORTH EAS VEGAS INV 65050	STREET ADDRESS  CITY-ST-ZIP					
CITY-ST-ZIP  DOCUMENT #  NAME		STREET ADDRESS					
STREET ADDRESS		CITY-ST-ZIP					
DOCUMENT A  NAME  STREET ADDRESS  CITY-ST-ZIP		STREET ADDRESS					
DOCUMENT #  NAME  STREET ADDRESS		CITY-ST-ZIP STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP					

14. I hereby certify that the information sypplied 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 shalf have the same legal effect as if made under dath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter [20, Florida Statutes]

SIGNATURE:

(702) 313-3700

## Signature Block:

## Broward Gardens Associates, Ltd.,

a District of Columbia general partnership,

By: Real Property Services Corp.,

a Delaware corporation, general partner

Rv

Allan S. Bird, President