## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## **FILED** A28308 DOCUMENT # May 02, 2000 8:00 am Secretary of State 1. Entity Name MIAMI BEACH VINTAGE PROPERTIES VI. LTD. Principal Place of Business Mailing Address 1601 JEFFERSON AVE. 1601 JEFFERSON AVE. MIAMI BEACH FL 33139 MIAMI BEACH FL 33139-7602 3. Mailing Address 2. Principal Place of Business 580 BISCAYNE BUIN 5801 BUSCAVNE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc City & State Applied For City & State 4. FEI Number 65-0121058 Not Applicable Country Country **\$8.75** Additional 5. Certificate of Status Desired ADE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CARVER, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 1601 JEFFERSON AVE. MIAMI BEACH FL 33131 Zip Code City 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) 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 10. Amount of Capital Contributions 9. Capital Contributions \$102,000.00 SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record: in FLORIDA to date. 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. GENERAL PARTNER INFORMATION 13. 12. CR2E003 (9/39) K76847 DOCUMENT# STREET ADDRESS MIAMI BEACH VINTAGE PROPERTIES INCORPORATE NAME 1601 JEFFERSON AVE. STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL CITY-ST-ZIP K80423 DOCUMENT # STREET ADDRESS NOTTINGHAM PROPERTIES, INC. NAME 1601 JEFFERSON AVE. STREET ADDRESS CITY - ST - ZIP MIAMI BEACH FL CITY-ST-ZIP K80425 DOCHMENT # STREET ADDRESS PSK INVESTMENTS, INC. 1601 JEFFERSON AVE. STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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