

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A29580**

1. Entity Name

MARTIN COUNTY BUSINESS PARK, LTD.

Principal Place of Business

**1400 E. NEWPORT CENTER DR., SUITE 209
DEERFIELD BEACH FL 33442**

Mailing Address

**1400 E. NEWPORT CENTER DR., SUITE 209
DEERFIELD BEACH FL 33442-7713**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 28 PM 6:38



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1350 E. Newport Center

3. Mailing Address

PO BOX 4219

Suite, Apt. #, etc.

Suite 206

Suite, Apt. #, etc.

City & State

Deerfield Beach, FL

City & State

Deerfield Beach, FL

4. FEI Number

65-0170550

Applied For

Not Applicable

Zip

33442

Country

USA

Zip

33442

Country

USA

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

KAY, JAMES R P.A.

**2000 PALM BEACH LAKES BLVD., SUITE 1002
WEST PALM BEACH FL 33409**

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.

\$1,000,000.00

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 # **L29787**
NAME **PRESTA I, INC.**
STREET ADDRESS **1400 E. NEWPORT CENTER DR., #209**
CITY - ST - ZIP **DEERFIELD BEACH FL**

13. ADDRESS CHANGES ONLY

STREET ADDRESS **1350 E. Newport Center Drive STE 2**
CITY - ST - ZIP **Deerfield Beach, FL 33442**

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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:

Linda G. Kassof

SIGNATURE REQUIRED

Linda G. Kassof 4/27/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #