

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A30786



1. Entity Name
BAHIA CABANA, LTD.

FILED
03 FEB 11 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
3700 GALT OCEAN DRIVE, STE. 508
FT. LAUDERDALE FL 33308

Mailing Address
3700 GALT OCEAN DRIVE, STE. 508
FT. LAUDERDALE FL 33308



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number **59-1440508**

Applied For

Not Applicable

Zip

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 Agent

CHANE, ALAN J
C/O HALTON
3700 GALT OCEAN DRIVE, STE. 508
FT. LAUDERDALE FL 33308

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

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. **\$2,600,000.00**

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
S04124	CABANA, INC.	3001 HARBOR DRIVE	FT. LAUDERDALE FL

STREET ADDRESS	CITY-ST-ZIP

100011902131
02/06/03--01022 006 **526.25

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: *Alan J. Chane* **SIGNATURE REQUIRED ALAN J. CHANE** 2/1/03 (954) 565-4460
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CP2E003 (10/02)