

2001 UNIFORM BUSINESS REPORT (UBR)

0003762 AF

DOCUMENT # **A30887**

1. Entity Name

MISTY OAKS PARTNERS, LTD.

Principal Place of Business

555 S. POMPANO PARKWAY
POMPANO BEACH FL 33065

Mailing Address

RJVF CORPORATE SERVICES, INC.
200 SOUTH BISCAYNE BLVD., STE. #4000
MIAMI FL 33131

FILED

01 APR 16 PM 12:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

680 W. Palm Aire Drive

3. Mailing Address

Suite, Apt. #, etc.
PMB 325

Suite, Apt. #, etc.

City & State

Pompano Beach

City & State

Zip

FL

Country

33069

Zip

Country

4. FEI Number

65-0230660

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RJVF CORPORATE SERVICES, INC.
C/O STEEL HECTOR & DAVIS
200 SO. BISCAYNE BOULEVARD, STE. 4000
MIAMI FL 33131

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.

\$300,000.00

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 # P94000090940
NAME MISTY/INWOOD CORP.
STREET ADDRESS 8223 NW 68 ST.
CITY-ST-ZIP MIAMI FL 33166

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

900004078819--3
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****535.00 ****535.00

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:

Sharon Chan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

03.12.01 954.9684408

Date

Daytime Phone #

CR2E003 (11/00)