

# 2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

0012711 AT

DOCUMENT # A31049

1. Entity Name

BHCL HOLDINGS, LTD.

02 MAR -1 AM 10:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

5458 TOWN CENTER ROAD, SUITE 101  
BOCA RATON FL 33486

Mailing Address

5458 TOWN CENTER ROAD, SUITE 101  
BOCA RATON FL 33486

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number

65-0241767

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

NOWICKI, MARK J ESQ.  
14155 U.S. HIGHWAY ONE  
SUITE 210  
JUNO BEACH FL 33408

Name

HILTON BECKER

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

5458 Town Center Road, Suite 101

City

Boca Raton

FL

Zip Code

33486

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.

DATE

2/25/02

9. Capital Contributions  
as Shown on record.

\$476,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # L99000001479  
NAME PATENT TECHNOLOGIES, L.C.  
STREET ADDRESS 921 SWEETWATER LANE  
CITY-ST-ZIP BOCA RATON FL 33431

STREET ADDRESS

5458 TOWN CENTER CIRCLE, STE 101

CITY-ST-ZIP

BOCA RATON, FL 33486

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

2/25/02

CR2E003 (9/01)