

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A32153**

1. Entity Name

SOUTHLAKE OFFICE PARK, LTD.

FILED

00 APR 18 AM 9:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**2300 CORAL WAY
SUITE 200, CANTELOP BLDG
MIAMI FL 33145**

Mailing Address
**2300 CORAL WAY
SUITE 200, CANTELOP BLDG
MIAMI FL 33145-3511**

2. Principal Place of Business
**1717 N. Bayshore Drive
Suite, Apt. #, etc.
Suite 208**

3. Mailing Address
**1717 N. Bayshore Drive
Suite, Apt. #, etc.
Suite 208**

City & State
Miami, Florida

City & State
Miami, Florida

Zip Country
33132 USA

Zip Country
33132 USA

4. FEI Number **65-0291487**

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**FLORIDA ANNUAL REPORTS SERVICES, INC.
2300 CORAL WAY, CANTELOP BLDG., STE 200
MIAMI FL 33145**

7. Name and Address of New Registered Agent

Name **S & K PROPERTY MANAGEMENT INC.**
Street Address (P.O. Box Number is Not Acceptable)
1717 No. BAYSHORE DRIVE
SUITE 208
City **MIAMI** **FL** Zip Code **33132**

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 *Lidia Cartaya* **LIDIA CARTAYA, VICE-PRES.** 3-31-00
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. **\$3,870,000.00**

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 # **S69734**
NAME **GRAND BAY INVSTMNTS, INC**
STREET ADDRESS **2300 CORAL WAY, CANTELOP BLDG., STE. 200**
CITY - ST - ZIP **MIAMI FL 33145**

13. ADDRESS CHANGES ONLY

STREET ADDRESS **1717 No. BAYSHORE DRIVE, SUITE # 208**
CITY - ST - ZIP **MIAMI, FL 33132**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS
CITY - ST - ZIP
400003225434-0
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DOCUMENT #
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STREET ADDRESS
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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: *Lidia Cartaya*

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

BY **LIDIA CARTAYA, VICE-PRESIDENT OF**
GENERAL PARTNERSHIP.

3/31/00

Date (305) 854-1040 Daytime Phone #