

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

MJM

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DOCUMENT # **A33517**



1. Entity Name  
**AIRPORT PLAZA PARTNERS, LTD.**

**FILED**  
03 MAY -6 PM 8:42  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Principal Place of Business  
**5728 MAJOR BLVD.  
SUITE 601  
ORLANDO FL 32819**

Mailing Address  
**5728 MAJOR BLVD.  
SUITE 601  
ORLANDO FL 32819**



2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

**DUE BY MAY 1, 2003**

City & State

4. FEI Number **59-3149169**  
Applied For  
Not Applicable

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

**KHATIB, RASHID A.  
5728 MAJOR BLVD.  
SUITE 601  
ORLANDO FL 32819**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$1,544,600.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$1,546,000**

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 # **V19919**  
NAME **INTRAM INVESTMENTS, INC.**  
STREET ADDRESS **5728 MAJOR BLVD.**  
CITY-ST-ZIP **ORLANDO FL 32819**

STREET ADDRESS **600018313736**  
CITY-ST-ZIP **05/06/03--01128--019 \*\*526.25**

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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: ~~SIGNATURE REQUIRED~~ **Rashid A. Khatib** 4-18-03 407-364-2200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)