2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

FILED
2003 JUN 20 PM 4:03
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOCUMENT # A92000000020

1. Entity Name
SANDPOINT FINANCIAL, LTD.

Principal Place of Business	Mailing Address
404 WASHINGTON AVE., STE. 120 MIAMI BEACH, FL 33139	404 WASHINGTON AVE., STE. 120 MIAMI BEACH, FL 33139

2. Principal Place of Business	3. Mailing Address
500 SOUTH POINTE DR	500 SOUTH POINTE DR
Suite, Apt. #, etc.: 220	Suite, Apt. #, etc.: 220
City & State: MIAMI BEACH, FL	City & State: MIAMI BEACH, FL
Zip: 33139 Country: USA	Zip: 33139 Country: USA

DUE BY MAY 1, 2003

4. FEI Number: 65-0373065 ☐ Applied For ☐ Not Applicable

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
HART, BRIAN A ADORNO & ZEDER 2601 SOUTH BAYSHORE DRIVE, 16TH FLOOR MIAMI, FL 33133	Name: SAME Street Address (P.O. Box Number is Not Acceptable): 1101 BRICKELL AVE #1400 City: MIAMI FL Zip Code: 33131

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.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL DEPT OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$5,511,511.41	# 5,354,970 SAME	

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 #	P96000093031	STREET ADDRESS	500 SOUTH POINTE DR #220
NAME	SANDPOINT FINANCIAL CORP.	CITY-ST-ZIP	MIAMI BEACH, FL 33139
STREET ADDRESS	404 WASHINGTON AVE., STE. 120		
CITY-ST-ZIP	MIAMI BEACH, FL 33139		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	500018470085 05/08/03--01002--012 **437.50
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DOCUMENT #		STREET ADDRESS	500018470085 06/20/03--01010--003 **68.75
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STREET ADDRESS			
CITY-ST-ZIP			

CR2E003 (10/02)

STAPLE CHECK HERE

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: VP OF SANDPOINT FIN'L CORP, G.P. 4/30/03 3055722519
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #