

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

DOCUMENT # A93000000175

1. Entity Name

JADRE, LTD.

00 APR -4 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

my 4/19



DO NOT WRITE IN THIS SPACE

Principal Place of Business

% ADELINE B. REINSTEIN
207 LAKE SUSAN LANE
WEST PALM BEACH FL 33411

Mailing Address

% ADELINE B. REINSTEIN
207 LAKE SUSAN LANE
WEST PALM BEACH FL 33411-9210

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2038962

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

REINSTEIN, ADELINE B
207 LAKE SUSAN LANE
WEST PALM BEACH FL 33411

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.

\$3,000.00

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 #
NAME REINSTEIN, ADELINE B
STREET ADDRESS 207 LAKE SUSAN LANE
CITY - ST - ZIP WEST PALM BEACH FL 33411

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME OLSEN, CILLIA
STREET ADDRESS 15 SHELLEY COURT
CITY - ST - ZIP PLAINVIEW NY 11803

STREET ADDRESS

CITY - ST - ZIP

100003223021-0
-04/25/00--01053--007
****141.25 ****141.25

DOCUMENT #
NAME MOREA, JEANNIE
STREET ADDRESS 18528 N.W. 19TH ST
CITY - ST - ZIP PEMBOKE PINES FL 32026

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

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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 #

3/28/00 561-471-1736

CR2E003 (9/99)