2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A93000000214

1. Entity Name SITCO DEVELOPMENT LIMITED PARTNERSHIP



FILED

OSMAR ID AMIL: 07

SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 3109 STIRLING ROAD 3109 STIRLING ROAD FT. LAUDERDALE, FL 33312 FT, LAUDERDALE, FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. .. DUE BY MAY 1, 2003 Applied For City & State 4. FEI Numbe City & State 65-0548239 Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HOLLANDER, DAVID 3109 STIRLING ROAD Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE, FL 33312 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 Signature, tripad or printed name of registered agent and title if applicable. 10. Amount of Capital Contributions 11 MAKE CHECK PAYABLE TO FL. DEPT OF STATE 9. Capital Contributions SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. as Shown on record. \$99.00 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. DOCUMENT # STREET ADDRESS NAME SILVER DEVELOPMENT CORP. 3109 STIRLING ROAD STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE, FL 33312 CITY-ST-ZIP 40001273154 DOCUMENT # 03/10/03--01065--013 - **141。25 STREET ADDRESS NAME STREET ADDRESS CITY - ST - 21P CITY-ST-ZIP DOCUMENT 4 STREET ADDRESS NAMÉ -STREET ADDRESS CITY-ST-ZIP CITY-ST-2IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY -ST - 2IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY - ST - ZIP COY - ST - 7IP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 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 accultate 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 a quired by Chapter 520, Florida Statutes

SIGNATURE:

CHECK HERE

SIGNATURE AND TYPED OR PRINT

CR2E003 (10/02)