

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A93000000688**

1. Entity Name  
**BYRONAIR APARTMENTS, LTD.**

FILED

00 MAR 27 PM 2:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
1882 BRICKELL AVE.  
MIAMI FL 33129

Mailing Address  
1882 BRICKELL AVE.  
MIAMI FL 33129-1623

2. Principal Place of Business  
**260 Crandon Blvd**  
Suite, Apt. #, etc.  
**# 8**

3. Mailing Address  
**260 Crandon Blvd.**  
Suite, Apt. #, etc.  
**# 8**

DO NOT WRITE IN THIS SPACE

City & State  
**KEY BISCAYNE, FL**

City & State  
**KEY BISCAYNE, FL**

Zip  
**33149** Country  
**U.S.**

Zip  
**33149** Country  
**U.S.**

4. FEI Number **65-0421227** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
**GARBER, HAROLD M**  
**12000 BISCAYNE BLVD #806**  
**MIAMI FL 33181**

7. Name and Address of New Registered Agent  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. **\$200,000.00**

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 # NAME STREET ADDRESS CITY - ST - ZIP	<b>P93000041702</b> <b>LA FRONTERA INVESTMENTS, INC.</b> <b>1882 BRICKELL AVE.</b> <b>MIAMI FL 33129</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS CITY - ST - ZIP	<b>260 Crandon Blvd #8</b> <b>KEY BISCAYNE, FL 33149</b>
STREET ADDRESS CITY - ST - ZIP	
STREET ADDRESS CITY - ST - ZIP	<del>2000003198492--3</del> <del>-04/06/00--01070--011</del> <del>***526.25 ***526.25</del>
STREET ADDRESS CITY - ST - ZIP	
STREET ADDRESS CITY - ST - ZIP	
STREET ADDRESS 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: **EDUARDO FERNANDEZ** 3/20/00 365-3673  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/99)