2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

A93000000851 DOCUMENT

1. Entity Name PERI PROCTOR & ASSOCIATES, LTD.



Principal Place of Business 1630 N.W. 3RD ST. DEERFIELD BEACH FL 33442

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Mailing Address 1630 N.W. 3RD ST. DEERFIELD BEACH FL 33442

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

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SECRETARY OF STATE FAUEAHASSEE, FEORIDA

Fee Required

DUE BY MAY 1, 2003					
4. FEI Number 65-0425965	Applied For				
	Not Applicable				
5 Certificate of Status Desired	S8.75 Additional				

REED AND COMPANY, CHARTERED 2424 N. FEDERAL HIGHWAY #200 **BOCA RATON FL 33431**

7. Name and Address of New Registered Agent				
Street Address (P.O. Box Number is Not Acceptable)				
		-		
City	·	FI	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.

Country

SIGNATURE Signature, typed or printed name of registered agent and title if applicable 9. Capital Contributions as Shown on record.

\$5,000.00

Country

6. Name and Address of Current Registered Agent

10. Amount of Capital Contributions in FLORIDA to date.

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

12.	GENERAL PARTNER INFORMATION	13.	the must be med to change a general partner.
DOCUMENT #	P93000047970	13.	ADDRESS CHANGES ONLY
NAME	PROCTOR ENTERPRISES, INC.	STREET ADDRESS	
STREET ADDRESS	1630 N.W. 3RD ST.		
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	CITY-ST-ZIP	
	DELIGITED DEACHT FE 33442		
DOCUMENT #			
NAME		STREET ADDRESS	_
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NAME		STREET ADDRESS	
Street address			
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #			
NAME		STREET ADDRESS	
STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP	
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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

IIRE Peri Prodo as Pres. of S.P. 272-03 SIGNATURE: 2