LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # 129300 5000 02 JUL -1 AM 8: 58 Rosemont Moder Ltd SECRETARY OF STATE TALLAHASSEE FLORIDA DO NOT WRITE IN THIS SPACE Principal Place of Business 3 Mailing Address DO NOT WRITE IN THIS SPACE D 1971 (197 Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1** City & State 4. EUNumber Applied For Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent <u>V1</u>S DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE in FLORIDA to date as Shown on record. 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. GENERAL PARTNER INFORMATION 12. CR2E003B (12/01) DOCUMENT # STREET ADDRESS NAME STREET ADDRESS 400006224374 CITY-ST-ZIP CITY-ST-ZIP -07/05/02--01056--011 DOCUMENT # ****535.00 ****535.00 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # IN THIS SPACE STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ALDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMEN# # STREET ADDRESS NAME 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 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