2001 UNIFORM BUSINESS REPORT (UI

1. Entity Nar	MENI# A9300 (0000933					^~	1		7
ERSON	enterprises, LTD.				FILE	D		\emptyset		Ą
Principal Place 11846 SW 117 MIAMI FL 3316	=			GRETARY OF STATE LAHASSEE, FLORIDA						
2. Principal F	31 AVENUE	10	DO NOT WRITE IN THIS SPACE							
City & State MISMI, FLORIDA City & State MISMI,			401		4. FEI Number	NOT APPLICA	ABLE	<u> </u>	pplied For ot Applicable]
Zip 3318	Country USA	Zip 33; 86	Country USA		5. Certificate o	f Status Desired		8.75 Ad e Require	ditional	
CORREDE 11846 SW MIAMI FL	Name Street Add	Street Address (P.O. Box Number is Not Acceptable)								
8. The above	e named entity submits this statement for	d title if applicable (NOTE: R	gistered office or re	faculted	when reinstating)	oı	/iq/o	<u> </u>		_
9. Capital Co as Shown	Contributions	000	<u>. – </u>	11. MAKE CHECK SEE REVERSE						
	A GENERAL PARTNER TH NOTE: General Partners MAY	IAT IS A BUSINESS ENTI	TY MUST BE RE	GIST	ERED AND AC	TIVE WITH THIS to change a gen	OFFICE. eral partn	er.		
12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GENERAL PARTNER I CORREDERA G., ERIC R 11846 SW 117 CT. MIAMI FL 33186	NFORMATION	13. STREET ADDRESS CITY-ST-ZIP			ADDRESS CHAN	IGES ONLY	247		CR2E003 (11/00)
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	CORREDERA, SONIA E 11846 SW 117 CT. MIAMI FL 33186		STREET ADDRESS			03/21/ 03/21/ 	763 01 3, 75	(037 ****1	-007 93, 75	CR2
DOCUMENT # - NAME STREET ADDRESS CITY-ST-ZIP	CORREDERA V., ERIC R JR. 11846 SW 117 CT. MIAMI FL 33186	<u>.</u>	'STREET ADDRESS '					-		- - - -
DOCUMENT / NAME STREET ADDRESS		7	STREET ADDRESS							_
CITY-ST-ZIP			CITY-ST-ZIP							
NAME STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	-			<u> </u>	 _		-
DOCUMENT #			STREET ADDRESS					 		1
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP]
indicated	certify that the information supplied with the on this report is true and accurate and the rer or trustee empowered to execute this.	at my signature shall have the	same legal effect :	as if ma	ction 119.07(3)(i), ade under oath; t	Florida Statutes. I fu hat I am a General P	irther certify artner of the	that the in e limited p	nformation partnership or	

NAME OF SIGNING GENERAL PARTNER

Date

Date

Daytime Phone #