

2002 UNIFORM BUSINESS REPORT (UBR)

001943 AT

DOCUMENT # A93000001108

1. Entity Name

YZAGUIRRE FAMILY LTD.

Principal Place of Business

P.O. BOX 210937
ROYAL PALM BEACH FL 33421

Mailing Address

P.O. BOX 210937
ROYAL PALM BEACH FL 33421

APPROVE
AND
FILED

02 APR -8 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

65-0450416

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YZAGUIRRE, ANDRES
13399 DOUBLE TREE CIRCLE
WELLINGTON FL 33414

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

Andres Yzaguirre, Fernando Portia 4/1/2002
Signature, typed or printed name of registered agent and title if applicable. 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

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME YZAGUIRRE, ANDRES
STREET ADDRESS 1913 CANTERBURY CIRCLE
CITY-ST-ZIP WELLINGTON FL 33414

STREET ADDRESS
CITY-ST-ZIP 400005234514-3
-04/10/02-01018-008
****526.25 ****526.25

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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:

Andres Yzaguirre
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/1/2002
Date Daytime Phone #

CR2E003 (9/01)

STAPLE CHECK HERE