

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0003469 AV

DOCUMENT # A93000001372

1. Entity Name
LAKE PARK SERVICE STATION, LTD.



FILED

2003 MAR 27 AM 10:01

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business
9031 N. MILITARY TRAIL
LAKE PARK FL 33418

Mailing Address
9031 N. MILITARY TRAIL
LAKE PARK FL 33418

2. Principal Place of Business

22608 BLUE FIN TRAIL

Suite, Apt. #, etc.

3. Mailing Address

22608 BLUE FIN TRAIL

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

BOCA RATON FL

Zip
33428

Country

U.S.

City & State

BOCA RATON FL

Zip
33428

Country

U.S.

4. FEI Number 65-0498967

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PAJERNO, FRANK
11120 HERON BAY BLVD
CORAL SPRINGS FL 33076

7. Name and Address of New Registered Agent

Name
FRANK PATERNO
Street Address (P.O. Box Number is Not Acceptable)
22608 BLUE FIN TRAIL
BOCA RATON
City
FL Zip Code
33428

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.

SIGNATURE DATE 3/24/03

9. Capital Contributions
as Shown on record. \$7,500.00

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 be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # P93000061891
NAME BAM MANAGEMENT CORP.
STREET ADDRESS 9031 N. MILITARY TRAIL
CITY-ST-ZIP LAKE PARK FL 33418

13. ADDRESS CHANGES ONLY

STREET ADDRESS 22608 BLUE FIN TRAIL
CITY-ST-ZIP BOCA RATON FL 33428

DOCUMENT #
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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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/24/03 954-804-2883
Date Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE