

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 07, 2000 08:00 AM
Secretary of State

DOCUMENT # A94000000048

1. Entity Name

TURNBERRY PLAZA, LTD.

Principal Place of Business

19495 BISCAYNE BOULEVARD
SUITE 400 / ATTN: LEGAL DEPT.
AVENTURA FL 33180

Mailing Address

19495 BISCAYNE BOULEVARD
SUITE 400 / ATTN: LEGAL DEPT.
AVENTURA FL 33180

2. Principal Place of Business

19501 BISCAYNE BOULEVARD

Suite, Apt. #, etc.

SUITE 400 / ATTN: LEGAL DEPT.

City & State

AVENTURA FL

Zip
33180

Country

3. Mailing Address

19501 BISCAYNE BOULEVARD

Suite, Apt. #, etc.

SUITE 400 / ATTN: LEGAL DEPT.

City & State

AVENTURA FL

Zip
33180

Country

4. FEI Number

65-0449707

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROMINE MARIO A
19501 BISCAYNE BOULEVARD
SUITE 400
AVENTURA FL 33180 US

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

02/07/2000

DATE

9. Capital Contributions

as Shown on record. 1,000,000.00

10. Amount of Capital Contributions

in FLORIDA to date. 1,000,000.00

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

DOCUMENT #
NAME C.J.A. HOLDING CORP.
STREET ADDRESS 2875 NORTHEAST 191ST STREET
CITY-ST-ZIP NORTH MIAMI BEACH FL 33180

DOCUMENT #
NAME YACHT CLUB REALTY CORP.
STREET ADDRESS 19501 BISCAYNE BLVD. SUITE 400
CITY-ST-ZIP AVENTURA FL 33180

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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: Jacobus Seffer

VP

02/07/2000