

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A94000000236

1. Entity Name

PREPPIES III, LTD.

FILED

02 MAR -6 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MJH

Principal Place of Business

2746 S.W. FERRE AV.
PALM CITY FL 34990

Mailing Address

C/O PASSARIELLO & STAIANO
6466 N.W. 5TH WAY
FORT LAUDERDALE FL 33023

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

65-0517023

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

B&C CORPORATE SERVICES, INC.
MIAMI CENTER
201 S. BISCAYNE BLVD., STE 3000
MIAMI FL 33131

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.

DATE

9. Capital Contributions
as Shown on record.

\$120,742.00

10. Amount of Capital Contributions
in FLORIDA to date.

120,742.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # K38729
NAME BJO, INC.
STREET ADDRESS 3305 S.W. RIVERS END WAY
CITY-ST-ZIP PALM CITY FL 34990

STREET ADDRESS 20 Castle Hill Way, Sewall's Point
CITY-ST-ZIP Stuart, FL. 34996

DOCUMENT # K38747
NAME EGT, INC.
STREET ADDRESS 518 N. RIVERPOINT DR.
CITY-ST-ZIP STUART FL 33494

STREET ADDRESS
CITY-ST-ZIP 100005098881-4

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP -03/13/02--01020--015
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DOCUMENT #
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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:

Kevin G. Levin
Gen Pth
3/2/02

772-283-4438
Daytime Phone #

CR2E003 (9/01)

0002647 AV

STAPLE CHECK HERE