

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A94000000283**

1. Entity Name  
**UNIQUE RESTAURANT CONCEPTS, LTD.**



**FILED**  
**03 JAN 30 AM 11:00**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

Principal Place of Business  
**315 S.E. MIZNER BLVD., STE. 211**  
**BOCA RATON FL 33432**

Mailing Address  
**315 S.E. MIZNER BLVD., STE. 211**  
**BOCA RATON FL 33432**



2. Principal Place of Business  
**428 PLAZA REAL**

3. Mailing Address  
**428 PLAZA REAL**

Suite, Apt. #, etc.  
**Apt # 224**

Suite, Apt. #, etc.  
**Apt # 224**

City & State  
**BOCA RATON, FL**

City & State  
**BOCA RATON, FL**

**DUE BY MAY 1, 2003**

4. FEI Number **65-0473204**

Applied For  
Not Applicable

7in  
**33432**

Country  
**USA**

Zip  
**33432**

Country  
**USA**

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

**MAX, DENNIS**  
**315 S.E. MIZNER BLVD., STE. 211**  
**BOCA RATON FL 33432**

Name

Street Address (P.O. Box Number is Not Acceptable)  
**428 PLAZA REAL # 224**

City **BOCA RATON** FL Zip Code **33432**

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 *[Signature]*

DATE **1/21/03**

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

9. Capital Contributions as Shown on record. **\$6,379,000.00**

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **H19181**  
NAME **UNIQUE RESTAURANT CONCEPTS, INC.**  
STREET ADDRESS **315 S.E. MIZNER BLVD., STE. 211**  
CITY-ST-ZIP **BOCA RATON FL 33432**

STREET ADDRESS **428 PLAZA REAL # 224**  
CITY-ST-ZIP **BOCA RATON, FL 33432**

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STREET ADDRESS **100011397311**  
CITY-ST-ZIP **01/30/03--01048--006 \*\*526.25**

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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: *[Signature]* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DATE **1/21/03**

561-  
392-0611

Date

Daytime Phone #

0003790 AV

CR2E003 (10/02)