

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A94000000345**

1. Entity Name

TURNSTILE LTD.

Principal Place of Business
4840 N.E. 28TH AVENUE
FT LAUDERDALE FL 33308

Mailing Address
4840 N.E. 28TH AVENUE
FT LAUDERDALE FL 33308-4825

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAR -6 PM 6:45



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0480493**

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

TARKOE, CLINTON M
4840 N.E. 28TH AVENUE
FT LAUDERDALE FL 33308

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)

DATE

9. Capital Contributions
as Shown on record.

\$160,000.00

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 # **V57780**
NAME **TURNSTILE INVESTMENTS, INC.**
STREET ADDRESS **4840 N.E. 28TH AVENUE**
CITY - ST - ZIP **FT LAUDERDALE FL 33308**

STREET ADDRESS

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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:

Clinton M. Tarkoe
Signature and Typed or Printed Name of Signing General Partner
Clinton M. Tarkoe
Inc. / General Partner

1/19/00 **954.772.785**
Date Daytime Phone #

CR2E003 (9/99)