200	2 UNI	FORM BUS	IN	ESS REP	PRT	(UBR)		
DOCUMENT # A9400000645 1. Entity Name							FILED _SECRETARY OF STATE	
ROHO DEVELOPMENT, LIMITED						TALLAHASSEE, FLORIDA		
Principal Place of Business SILVER BUILDERS. INC. 3109 STIRLING ROAD. SUITE 200 FT LAUDERDALE FL 33312				Mailing Address % SILVER BUILDERS. INC. 3109 STIRLING ROAD. SUITE 200 FT LAUDERDALE FL 33312			O2 MAR 28	
2. Principal Place of Business			3.	3. Mailing Address				
Suite, Apt. #, etc.				Suite, Apt. #, etc.			DUE BY MAY 1, 2002	
City & State			City & State				4. FEI Number 65-0500318 Applied For Not Applicable	
Zip		Country		Zip	Cour	ntry	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROSS REALTY INVESTMENTS, INC. 3325 SOUTH UNIVERSITY DRIVE, SECOND FLOOR DAVIE FL 33328-2020						Name	7. Name and Address of New Registered Agent	
						<u></u>	fress (P.O. Box Number is Not Acceptable)	
DAVIL 1 E 000E0 E0E0						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				
9. Capital Contributions as Shown on record. \$980.00 In FLORID						butions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE	
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			13.	.,	ADDRESS CHANGES ONLY	
OCUMENT # G95058 NAME SILVER DEVELOPMENT, INC. STREET ADDRESS 3109 STIRLING ROAD, SUITE 26			0			EET ADDRESS	3000051891833	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312 528838				CITY	-ST-ZIP	-04/03/0201038010 	
NAME ROSS REALTY INVESTMENTS, INC. STREET ADDRESS 10021 PINES BOULEVARD, SUITE 1			IC. F 101	,. 101		EET ADDRESS	al.	
CITY-ST-ZIP	PEMBROKE PINES FL 33024					-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS				•	STRE	ET ADDRESS		
CITY-ST-ZIP				· · · · · · · · · · · · · · · · · · ·	CITY	-ST-ZIP		
DOCUMENT # NAME					STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP					CITY	-ST-ZIP		
DOCUMENT # NAME					STRE	ET ADDRESS		
STREET DDRESS City-St-Zip					CITY	-ST-ZIP		
DOCUMENT# NAME					STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP		4	1.	and the state of t	1	-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 is required by Chapter 620, Florida Statutes G.P. President Siver Dev. Corp. 2.22.02 954-962-9700

SIGNATURE: