

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A95000000304**

1. Entity Name

HILLSBORO COMMERCE PARK LTD.

Principal Place of Business

C/O ABDO INVESTMENTS, INC.
7280 WEST PALMETTO PARK ROAD, SUITE 306
BOCA RATON FL 33433

Mailing Address

C/O ABDO INVESTMENTS, INC.
7280 WEST PALMETTO PARK ROAD, SUITE 306
BOCA RATON FL 33433-3401

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAY -1 PM 12:06



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0581829**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

COHN, ALAN B
C/O ABRAMS, ANTON, ET AL
2021 TYLER STREET
HOLLYWOOD FL 33022

Name
Beaver Properties, Inc.
Street Address (P.O. Box Number is Not Acceptable)
7280 W. Palmetto Park Road
Suite 306N
City
Boca Raton **FL** Zip Code
33433

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.

Peter Sabga, President

04/26/2000

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$1,200,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$873,122.00

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 # **S60091**
NAME **ABDO INVESTMENTS, INC.**
STREET ADDRESS **7280 WEST PALMETTO PARK ROAD, SUITE 306**
CITY - ST - ZIP **BOCA RATON FL 33433**

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, 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

04/26/2000

Date

(561) 392-2777

Daytime Phone #