

# 2000 UNIFORM BUSINESS REPORT (UBR)

LC00338 AF

**DOCUMENT # A95000000459**  
 1. Entity Name  
**GREEN VISTA APARTMENTS, LTD.**

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

00 APR 27 AM 3:05

Principal Place of Business  
 7700 NORTH KENDALL DR.  
 SUITE 200  
 MIAMI FL 33156

Mailing Address  
 7700 NORTH KENDALL DR.  
 SUITE 200  
 MIAMI FL 33156-7578



2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip

4. FEI Number **65-0565633**  
 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  
**GREEN, ELIZABETH A ESQ.**  
**7700 NORTH KENDALL DR.**  
**SUITE 200**  
**MIAMI FL 33156**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$1,772,695.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$1,772,695.00**

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	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	M33260 DESIGN CORPORATION OF AMERICA, II 7700 NORTH KENDALL DR., STE. 200 MIAMI FL 33156
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P95000020988 GREEN VISTA APARTMENTS, INC. 490 OPA-LOCKA BLVD., #20 OPA LOCKA FL 33054
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
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13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	<b>300003260669--2</b>
CITY - ST - ZIP	<b>-05/19/00--01134--010</b> <b>****526.25 ****526.25</b>
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	

CR2E003 (5/01)

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

**Design Corporation of America, II, a Florida Corporation, its General Partner**  
 SIGNATURE: By: *Elizabeth A. Green* **REQUIRED** Date: **4-17-00** Daytime Phone #: **(305)670-1000**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER