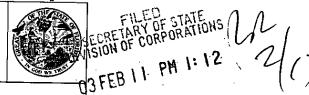
2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

UNIFORM BUSINESS REPORT	(UBI
DOCUMENT # A9500000511	<u></u>

1. Entity Name PLANTATION MGROUP LTD.

SIGNATURE: By:



401-456-1200, x 333

1/13/03

Principal Place of Business C/O SOUTHEAST CENTERS 1541 SUNSET DR. SUITE 300 CORAL GABLES FL 33143		NC SN	Mailing Address NORMAN ORODENKER/TILLINGHAST LICHT PERKINS SMITH & COHEN LLP/10 WEYBOSSET ST 10TH FL PROVIDENCE RI 02903						1) <b>11</b> 111 <b>11</b> 111		/ 8/	
2. Principal Place of Business		3.	3. Mailing Address				†	14 1 <b>618 1616</b> 1 61141 <b>61</b> 41 <b>61</b> 5	<b>45</b>   { <b>14</b>  }		AI 51195 11561  1561   <b>156</b> 1	
Suite, Apt. #, etc.			5	Suite, Apt. #, etc.				DUE BY MAY 1, 2003				
City & State			City & State					4. FEI Numb	er 13-3840576			Applied For Not Applicable
Zip	0.01	Country		?ip 	Cour	ntry		5. Certificate	of Status Desired			5 Additional equired
		and Address of Current	Regist	ered Agent				7. Name and	Address of New Ro	egistered	Agent	
AXELRO	), alan d					Name						
		G.DUNN & AXELROD I	LLP			Street Address (P.O. Box Number is Not Acceptable)						
2500 FIR:	ST UNION F	INANCIAL CENTER					<del></del>				<del></del>	
MIAMI FL	33131					L						
	) v					City	-			FL		Code
8. The above	named entity	v submits this statement fo	r the pu	rpose of changing its	registere	ed office or reg	gistere	d agent, or both	h, in the State of Flor	ida. Lam	familiar	with and accept
ine obliga	tions of registe	ered agent.				_	-	• ,	, 5	iou. Tuiri	Tarringi	wiin, and accept
SIGNATURE	Cionatura husail			<u> </u>						•		
9. Capital Co		printed name of registered agent a	and title if a							DATE		
as Shown	9. Capital Contributions \$2,998,600.00 10. Amount of Capital as Shown on record.					outions			11. MAKE CHECK	PAYABLE	TO FL.	DEPT. OF STATE
	A G	ENERAL PARTNER T	HAT IS	A BUSINESS EN	TITY MI	UST BE REC	GISTE	RED AND A	SEE REVERSE			VEURMATION
12.	NOTE:			to changed on th	e form	an amendr	ment	must be filed	to change a ger	neral par	tner.	
DOCUMENT #	GENERAL PARTNER INFORMATION								ADDRESS CHAI	VGES ON	ĹY	
NAME	PLANTATION MGP CORP.				STREE	street ADDRESS 160 Norman G. Orodenker Esquare						-
STREET ADDRESS						.						
CITY-ST-ZIP					CITY-ST-ZIP Pro			ovidence, RI 02903				
DOCUMENT #					стрес	T ADDRESS			<u> </u>			
NAME STREET ADDRESS					SINEC	I ADURESS						
CITY-ST-ZIP					CITY-:	ST-ZIP						
DOCUMENT #		<del></del>			-							
NAME		•			STREE	T ADD <u>r</u> ess	_		001230		d C	
STREET ADDRESS					1				0301025		**526	<del> </del>
CiTY-ST-ZIP				<del></del>	CITY-S	ST-ZIP		<del></del>	· · ·			THE SALE
DOCUMENT #					STREET	F ADDRESS			· · ·			
NAME STREET ADDRESS					STREET	ADDRESS						
CITY-ST-ZIP					CITY-S	ST-ZIP						
DOCUMENT #	,	<u> </u>	<u> </u>	<del></del>	<del> </del>		-	<del>-                                    </del>		<del>.</del>		
NAME					STREET	ADDRESS			•			ĺ
STREET ADDRESS					CITY C	. 700		· · · · · · · · · · · · · · · · · · ·	ī .			<del></del>
CITY-ST-ZIP	<del></del> -		_	<u> </u>	CITY-S	1-217		·				1
DOCUMENT # NAME					STREET	ADDRESS						
STREET ADDRESS					·							
CITY-ST-ZIP					CITY-ST	T-ZIP	-					
14. I hereby ce indicated o the received	r or trustee on	nformation supplied with the structural accurate and the spowered to execute this realitation MGP (	renort a	S APPRIZED by Chanton	he exemple same le r 620, Flo	otion stated in egal effect as in rida Statutes	Section Sectio	on 119.07(3)(i), e under oath; th	Florida Statutes. I fui nat I am a General Pa	rther certif artner of th	y that th	e information d partnership or

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