

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0001799 AV

DOCUMENT # A95000001152

1. Entity Name
ANGEL C. SAQUI, FAIA, ARCHITECTS, PLANNERS, INTERIORS, LTD.



FILED

03 MAR 19 AM 8:52

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MSJH

Principal Place of Business
2801 PONCE DE LEON BLVD.
SUITE 820
CORAL GABLES FL 33134

Mailing Address
2801 PONCE DE LEON BLVD.
SUITE 820
CORAL GABLES FL 33134



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number 65-0699284

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

SAQUI, ANGEL C
1240 NE 81 TERRACE
MIAMI FL 33138

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. \$5,000.00

10. Amount of Capital Contributions in FLORIDA to date. \$5,000.00

11. MAKE CHECK PAYABLE TO FL. 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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
SAQUI, ANGEL C
1240 NE 81 TERRACE
MIAMI FL 33138

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
SAQUI, ANGEL C II
13841 SW 34 ST.
MIAMI FL 33175

STREET ADDRESS

CITY-ST-ZIP

000014379790
03/19/03--01072--003 **150.00

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
SAQUI, ROSARIO C
1240 NE 81 TERRACE
MIAMI FL 33138

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-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 as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

JAN 28/2003 (305)4454544

Date

Daytime Phone #

CR2E003 (10/02)