

2000 UNIFORM BUSINESS REPORT (UBR)

10128631 /UF

4/24/21

FILED
00 APR 13 AM 8:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

DOCUMENT # A95000001158

1. Entity Name
SILVAL (CORAL SPRINGS), LTD.

Principal Place of Business
5855 PADDINGTON WAY
BOCA RATON FL 33496

Mailing Address
5855 PADDINGTON WAY
BOCA RATON FL 33496-2515

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

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

Zip **Country** **Zip** **Country**

4. FEI Number 65-0597317 **Applied For**
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

STEINBERG, LAWRENCE B
5855 PADDINGTON WAY
BOCA RATON FL 33496

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

9. Capital Contributions as Shown on record. **\$514,500.00** **10. Amount of Capital Contributions** in FLORIDA to date. **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 #	P95000027434	STREET ADDRESS	STREET ADDRESS	
NAME	NORTHSTAR ACQUISITION CORP.	CITY - ST - ZIP	CITY - ST - ZIP	
STREET ADDRESS	5855 PADDINGTON WAY			
CITY - ST - ZIP	BOCA RATON FL 33496			
DOCUMENT #		STREET ADDRESS	STREET ADDRESS	
NAME		CITY - ST - ZIP	CITY - ST - ZIP	
STREET ADDRESS				
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DOCUMENT #		STREET ADDRESS	STREET ADDRESS	
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STREET ADDRESS				
CITY - ST - ZIP				

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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 or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: By: [Signature] LAWRENCE B. STEINBERG **April 10/00** **561.996.2524**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER SECRETARY Date Daytime Phone #