

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0018265 AB

DOCUMENT # A95000001160**1. Entity Name**
BRITAIN SC CO., LTD.**FILED**
03 APR 16 AM 7:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

Principal Place of Business
21301 POWERLINE ROAD, #312
BOCA RATON FL 33433**Mailing Address**
P.O. BOX 11229
KNOXVILLE TN 37939**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3328251

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required****6. Name and Address of Current Registered Agent**CLIFFORD L. WALTERS
802 11TH STREET WEST
BRADENTON FL 34205**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. 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.

\$765,000.00

10. Amount of Capital Contributions
in FLORIDA to date.**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 #** P95000055422
NAME PEARL GENERAL, INC.
STREET ADDRESS 21301 POWERLINE ROAD, #312
CITY-ST-ZIP BOCA RATON FL 33433

STREET ADDRESS

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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

April 6, 2003

Date

(865) 584-4175

Daytime Phone #

CR2E003 (10/02)