

2002 UNIFORM BUSINESS REPORT (UBR)

0008973 AT

DOCUMENT # A95000001700

1. Entity Name
DADE FOREIGN TRADE ZONE, LTD.

FILED

02 APR 16 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**200 S. BISCAYNE BLVD., SUITE 2100
MIAMI FL 33131**

Mailing Address
**% ODED MELTZER, PRESIDENT
6431 COW PEN RD.
MIAMI LAKES FL 33014**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

DUE BY MAY 1, 2002

4. FEI Number **65-0741543**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FIELDSTONE LESTER & SHEAR
200 S. BISCAYNE BLVD., SUITE 2100
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name **Robert A. Stok, esq.**

Street Address (P.O. Box Number is Not Acceptable)
2675 NW 191 Street Suite 304

City **Aventura** FL Zip Code **33180**

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 DATE **4/5/02**

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

9. Capital Contributions as Shown on record. **\$1,000.00**

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

DOCUMENT #	V23803
NAME	DADE FOREIGN TRADE ZONE, INC.
STREET ADDRESS	% ODED MELTZER, PRESIDENT, 6431 COW PEN RD.
CITY-ST-ZIP	MIAMI LAKES FL 33014
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	AL
CITY-ST-ZIP	
STREET ADDRESS	200005361932-4
CITY-ST-ZIP	-04/29/02--01020--003
STREET ADDRESS	****141.25 ****141.25
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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: **4/4/02** **305 558 8052**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

CR2E003 (9/01)