

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A96000000020**

1. Entity Name

ALPHA TRUST, LTD.

Principal Place of Business

**7280 WEST PALMETTO PARK ROAD, SUITE 306-N
BOCA RATON FL 33433**

Mailing Address

**7280 WEST PALMETTO PARK ROAD, SUITE 306-N
BOCA RATON FL 33433-3401**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -1 PM 12:06



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2610304

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**COHN, ALAN B
C/O ABRAMS, ANTON, ET AL
2021 TYLER STREET
HOLLYWOOD FL 33022**

7. Name and Address of New Registered Agent

Name
Beaver Properties, Inc.
Street Address (P.O. Box Number is Not Acceptable)
7280 W. Palmetto Park Road
Suite 306N
City
Boca Raton **FL** Zip Code
33433

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

Peter Sabya, President

04/26/2000

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.

\$4,200,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$1,197,671.00

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 # **P96000013800**
NAME **KASSIS HOLDINGS, INC.**
STREET ADDRESS **7280 WEST PALMETTO PARK ROAD, SUITE 306-N**
CITY - ST - ZIP **BOCA RATON FL 33433**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

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:

SIGNATURE REQUIRED
Joseph Sabya

04/26/2000

(561) 392-2777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #