2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

Mailing Address C/O DAVID S. EISEN

1250 DEERE PARK LANE

A9600000025 **DOCUMENT #**

Principal Place of Business C/O HELGA BAGAN

3590 SOUTH OCEAN BLVD.

1. Entity Name
THE ERNA SIMON FAMILY PARTNERSHIP, LTD.



FILED Feb 18, 2003 8:00 A.M. Secretary of State

PALM BEACH	FL 33480		DEI	ERFIELD IL 60015							
2. Principal Place of Business			3. Mailing Address				_ 				
Suite, Apt. #, etc.			Suite, Apt. #, etc.					DUE BY MAY 1, 2003			
City & State			C	City & State		4. FEI Number	4. FEI Number 65-0634816 Applied For Not Applicable				
Zip	Country		Z	ip :	Count		5. Certificate o	5. Certificate of Status Desired			
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
BAGÂN, HELGA						Name					
,						Street Address (P.O. Box Number is Not Acceptable)					
3590 SOUTH OCEAN BLVD.						Sileet Address (F.O. Box Number is Not Acceptable)					
PALM BEACH FL 33480											
						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.											
9. Capital Contributions as Shown on record. \$860, 154.35 10. Amount of Capital Contributions in FLORIDA to date.						outions #80	60, 154,35			FL. DEPT. OF STATE 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.					13.	-	ADDRESS CHANGES ONLY				
DOCUMENT #	F9600000070					TREET ADDRESS					
NAME	SIMON-EISEN HOLDINGS, INC. 1250 DEERE PARK LANE DEERFIELD IL 60015				SINE	ET AUUNESS				, ,	
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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

SIMON - EISEN HOLDINGS IINC.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

DOCUMENT #

CITY-ST-ZIP

NAME STREET ADDRESS