FILED

03 MAY -6 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000000614

1. Entity Name
PLUMS PLAZA LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
2411 N.E. 32ND COURT LIGHTHOUSE POINT, FL 33064	2411 N.E. 32ND COURT LIGHTHOUSE POINT, FL 33064

DUE BY MAY 1, 2003

2. Principal Place of Business	3. Mailing Address
P.O. Box 51860 Suite, Apt. #, etc.	P.O. Box 51860 Suite, Apt. #, etc.
City & State: LIGHTHOUSE POINT, FL	City & State: LIGHTHOUSE POINT, FL
Zip: 33075 Country: USA	Zip: 33075 Country: USA

4. FEI Number: 65-0646736 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SLATOFF, ROBERT T
FRANK, ESSMAN, WEINBERG & BLACK
7805 SW 6TH COURT
PLANTATION, FL 33324

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

9. Capital Contributions as Shown on record. $229,194.43

10. Amount of Capital Contributions in FLORIDA to date. 1,000.00

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 #			
NAME	REITANO, JOSEPH A	STREET ADDRESS	P.O. Box 51860
STREET ADDRESS	2411 N.E. 32ND COURT	CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33075
CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064		
DOCUMENT #			
NAME	REITANO, HELEN	STREET ADDRESS	P.O. Box 51860
STREET ADDRESS	2411 N.E. 32ND COURT	CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33075
CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064		
DOCUMENT #		STREET ADDRESS	
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NAME		CITY-ST-ZIP	000018507020
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CITY-ST-ZIP			

STAPLE CHECK HERE

CR2E003 (10/02)

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 607, Florida Statutes.

SIGNATURE: X _____ 04/28/03 954-457-0970
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #