

2002 UNIFORM BUSINESS REPORT (UBR)

192

DOCUMENT # **A96000000894**

1. Entity Name

L & L PARTNERS, LTD.

Principal Place of Business

**10155 COLLINS AVE
APT #408
MIAMI BEACH FL 33154**

Mailing Address

**10155 COLLINS AVE
APT #408
MIAMI BEACH FL 33154**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY: SEPTEMBER 25, 2002

4. FEI Number **65-0677025**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**M & W AGENTS, INC.
900 S DADELAND BLVD
SUITE 1707
MIAMI FL 33156**

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.

\$361,697.00

10. Amount of Capital Contributions in FLORIDA to date.

361,697.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME **MITTMAN, LEWIS TRUSTEE**
STREET ADDRESS **10155 COLLINS AVE #408**
CITY-ST-ZIP **MIAMI BEACH FL 33154**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME **MITTMAN, LILLIAN TRUSTEE**
STREET ADDRESS **10155 COLLINS AVE #408**
CITY-ST-ZIP **MIAMI BEACH FL 33154**

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

500008374635
10/15/02--01025--020 **98.75

500008374635
10/15/02--01025--021 **437.50

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: _____

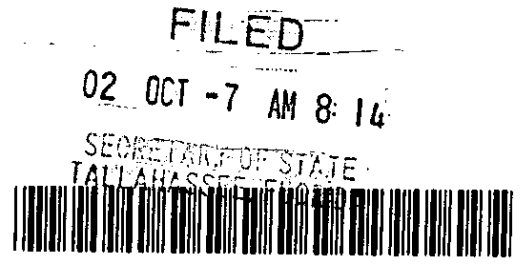
Lillian Mittleman
LILLIAN MITTMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

9/8/02 914-934-7515

Date

Daytime Phone #



A96000000894

202

BLOOM, GETTIS, HABIB, SILVER & TERRONE, P.A.

CERTIFIED PUBLIC ACCOUNTANTS & BUSINESS CONSULTANTS

SUITE 1450

2601 SOUTH BAYSHORE DRIVE
MIAMI, FLORIDA 33133-9893

BURT R. BLOOM, C.P.A., C.V.A.
LAWRENCE W. GETTIS, C.P.A.
STEVEN M. HABIB, C.P.A.
MICHAEL A. SILVER, C.P.A.
ROGER J. TERRONE, C.P.A.
CURT A. ROSNER, C.P.A., A.B.V.

TELEPHONE (305) 858-6211

FACSIMILE (305) 858-9696

www.bloomgettis.com

September 5, 2002

Florida Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314-6327

FILED
02 OCT -7 AM 8:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: L&L Partners, Ltd.

FEI #: 65-0677025

Dear Sir or Madam:

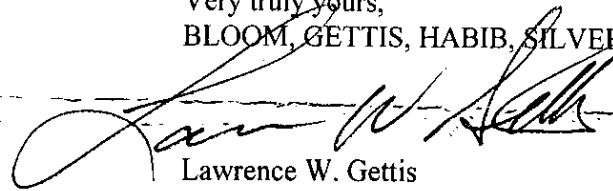
Enclosed, please find the Uniform Business Report for year 2002 for the above referenced taxpayer. The taxpayer had a change of address during the previous year and did not receive the original preprinted forms from the Department of State for 2002 that were due by May 1, 2002.

The taxpayer has always fulfilled its filing requirements in the past, and will continue to do so in the future, but respectfully request that you waive any late filing penalties in this case.

Should you require further information regarding this matter, please don't hesitate to contact the undersigned.

Very truly yours,

BLOOM, GETTIS, HABIB, SILVER & TERRONE, P.A.



Lawrence W. Gettis

Cc: Lewis Mittman