

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0009590 AT

DOCUMENT # A96000001059

1. Entity Name
U.A.P. LIMITED PARTNERSHIP



FILED
03 MAY -6 PM 8:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJM

Principal Place of Business
6032 N.W. 73RD COURT
PARKLAND FL 33067

Mailing Address
6032 N.W. 73RD COURT
PARKLAND FL 33067



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number 65-0669389

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6221 ENTERPRISES, INC.
6032 N.W. 73RD COURT
PARKLAND FL 33067

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. \$1,188,000.00

10. Amount of Capital Contributions in FLORIDA to date.

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 # P95000023474
NAME 6221 ENTERPRISES, INC.
STREET ADDRESS 6032 N.W. 73RD COURT
CITY-ST-ZIP PARKLAND FL 33067

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: Robert A. Freedman, P.E.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/28/03 (854) 752-4227
Date Daytime Phone #

CR2E003 (10/02)