2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A96000001595

FILED
03 APR 25 PM 4:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

1. Entity Name
LETO BROTHERS FAMILY PARTNERSHIP, LTD.

Principal Place of Business	Mailing Address
5121 JACKSON STREET HOLLYWOOD FL 33021-7233	5121 JACKSON STREET HOLLYWOOD FL 33021-7233

4/25

2. Principal Place of Business	3. Mailing Address
3100 STIRLING RD	3100 STIRLING RD
Suite, Apt. #, etc.: HOLLYWOOD	Suite, Apt. #, etc.
City & State: FL 33021	City & State: HOLLYWOOD FL
Zip: 33021 Country: USA	Zip: 33021 Country: USA

DUE BY MAY 1, 2003

4. FEI Number 65-0694347 ☐ 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
GLASSER, GENE K % ABRAMS, ANTON, ROBBINS, RESNICK ET AL 2021 TYLER ST. HOLLYWOOD FL 33022	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.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$1,000,000.00		

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 #		STREET ADDRESS	
NAME	LETO, JOHN A SR.	CITY-ST-ZIP	
STREET ADDRESS	5121 JACKSON STREET		
CITY-ST-ZIP	HOLLYWOOD FL 33021		
DOCUMENT #		STREET ADDRESS	000017097160
NAME	LETO, PETER J SR.		04/25/03 01047 020 **526.25
STREET ADDRESS	221 NURMI DRIVE	CITY-ST-ZIP	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301		
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CR2E003 (10/02)

STAPLE CHECK HERE

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 JOHN LETO 4/21/03 954-989-9520
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #