

2001 UNIFORM BUSINESS REPORT (UBR)

0003841 AF

DOCUMENT # **A96000001666**

1. Entity Name

BISCAYNE JOINT VENTURE LTD.

FILED

01 MAY -1 PM 12:32

Principal Place of Business

Mailing Address

**200 SOUTH BISCAYNE BLVD., SUITE 4015
MIAMI FL 33134**

**200 SOUTH BISCAYNE BLVD., SUITE 4015
MIAMI FL 33134**

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1548 BRICKELL AVE.

Suite, Apt. #, etc.

3. Mailing Address

1548 BRICKELL AVE.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0714422

Applied For

Not Applicable

Zip

33129-1210

Country

USA

Zip

33129-1210

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SALUSSOLIA, PIERO

200 SOUTH BISCAYNE BLVD., SUITE 4015

MIAMI FL 33134

7. Name and Address of New Registered Agent

Name

SALUSSOLIA, PIERO

Street Address (P.O. Box Number is Not Acceptable)

1548 BRICKELL AVE.

City

MIAMI

FL

Zip Code

33129-1210

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.

SIGNATURE

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

PIERO SALUSSOLIA

(NOTE: Registered Agent signature required when reinstating)

04/26/01

DATE

9. Capital Contributions
as Shown on record.

\$552,500.00

10. Amount of Capital Contributions
in FLORIDA to date.

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

DOCUMENT # **P00000049982**
NAME **PEA HOLDING INC**
STREET ADDRESS **200 SOUTH BISCAYNE BLVD., SUITE 4015**
CITY-ST-ZIP **MIAMI FL 33134**

13. ADDRESS CHANGES ONLY

STREET ADDRESS **1548 BRICKELL AVE.**
CITY-ST-ZIP **MIAMI, FL 33129-1210**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

700004221557-7
-05/17/01-01017-006
******526.25 ****526.25**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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:

PIERO SALUSSOLIA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04/26/01

Date

305-373-7015

Daytime Phone #

CR2E003 (11/00)