

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000001873

1. Entity Name

BORENSTEIN INVESTMENTS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 AUG 21 AM 10:02

Principal Place of Business

3000 ISLAND BLVD., APT. #1205
AVENTURA FL 33160

Mailing Address

3000 ISLAND BLVD., APT. #1205
AVENTURA FL 33160-4924

2. Principal Place of Business

2600 ISLAND BLVD

3. Mailing Address

2600 ISLAND BLVD

Suite, Apt. #, etc.

1506

Suite, Apt. #, etc.

1506

City & State

AVENTURA FL

City & State

AVENTURA FL

Zip

33160

Country

U.S.A.

Zip

33160

Country

U.S.A.

4. FEI Number

65-0708125

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

A Z REGISTERED AGENT CORPORATION
2601 S. BAYSHORE DRIVE, SUITE 1600
MIAMI FL 33133

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$2,235,496.00

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 # P96000082873
NAME BORENSTEIN INVESTMENTS, INC.
STREET ADDRESS 3000 ISLAND BLVD., APT. #1205
CITY - ST - ZIP AVENTURA FL 33160

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13. ADDRESS CHANGES ONLY

STREET ADDRESS 2600 ISLAND BLVD # 1506
CITY - ST - ZIP AVENTURA FL 33160

STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS
CITY - ST - ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/99)

305-936-9078

8-27-00