

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000002072

1. Entity Name

FIVE PLUS HOLDINGS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN 26 PM 1:29

Principal Place of Business

**8211 West Broward Blvd.
Suite 460
Plantation, FL 33324**

Mailing Address

**8211 West Broward Blvd.
Suite 460
Plantation, FL 33324**

2. Principal Place of Business

**7301 NW 4th. Street
Suite, Apt. #, etc.
Suite 102**

3. Mailing Address

**641 Seneca Road
Suite, Apt. #, etc.**

City & State

Plantation, FL 33317

City & State

Great Falls, VA

4. FEI Number

65-0803708

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

HANNAN, DAVID F

**8211 West Broward Blvd.
Suite 460
Plantation, FL 33324**

Name

David F. Hannan

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

7301 NW 4th. Street

Suite 102

City

Plantation,

FL

Zip Code **33317**

7. Name and Address of New Registered Agent

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 translating)

DATE

9. Capital Contributions
as Shown on record:

\$10,000.00

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 # **P98000008537**
NAME **Business Ventures International, Inc.**
STREET ADDRESS **8211 West Broward Blvd. Suite 460**
CITY-ST-ZIP **Plantation, FL 33324**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS **7301 NW 4th. Street, Suite 102**
CITY-ST-ZIP **Plantation, FL 33317**

STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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******158.75 ****158.75**

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, 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

Robert L. Patron (Pres. GP) 2/22/2000 954-581-9

Date

Daytime Phone #