

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A96000002312**

1. Entity Name

WAFIYA FAMILY PARTNERSHIP, LTD.

FILED

02 JAN 23 PM 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

C/O RICHARD J. RAZOOK
ONE SOUTHEAST THIRD AVE., 17TH FLOOR
MIAMI FL 33131

Mailing Address

C/O RICHARD J. RAZOOK
ONE SOUTHEAST THIRD AVE., 17TH FLOOR
MIAMI FL 33131

2. Principal Place of Business

C/O RICHARD J. RAZOOK

Suite, Apt. #, etc.

800 BRICKELL AVE., SUITE 201

City & State
MIAMI, FLORIDA

Zip

33131

Country

USA

3. Mailing Address

C/O RICHARD J. RAZOOK

Suite, Apt. #, etc.

800 BRICKELL AVE., SUITE 201

City & State
MIAMI, FLORIDA

Zip

33131

Country

USA

DUE BY MAY 1, 2002

4. FEI Number

65-0722063

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RAZOOK, RICHARD J
C/O THOMSON MURARO RAZOOK & HART, P.A.
ONE SOUTHEAST THIRD AVE., 17TH FLOOR
MIAMI FL 33131

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.

DATE

9. Capital Contributions
as Shown on record.

\$2,200,000.00

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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
	WAFIYA EL HASSANY SHAFAY, TRUSTEE	ONE SOUTHEAST THIRD AVE., 17TH FLOOR	MIAMI FL 33131
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	RICHARD J. RAZOOK, TRUSTEE	ONE SOUTHEAST THIRD AVE., 17TH FLOOR	MIAMI FL 33131
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS	800 BRICKELL AVENUE
CITY-ST-ZIP	SUITE 201 MIAMI, FL 33131
STREET ADDRESS	800 BRICKELL AVENUE
CITY-ST-ZIP	SUITE 201 MIAMI, FL 33131
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	500004831885
CITY-ST-ZIP	-01/28/02--01092--009 ****526.25 ****526.25
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:

REQUIRED
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

1-16-02

CR2E003 (9/01)