

AMENDMENT TO UBR
2001 UNIFORM BUSINESS REPORT (UBR)

A96000002319

DOCUMENT # A96000002319

1. Entity Name

M&I COWAN INVESTMENTS, LTD

Principal Place of Business

3725 SOUTH OCEAN DRIVE
SUITE 718
HOLLYWOOD, FL 33019

Mailing Address

3725 SOUTH OCEAN DRIVE
SUITE 718
HOLLYWOOD, FL 33019

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0724660

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

SHORE, H. ALLAN
1221 BRICKELL AVENUE
MIAMI, 33131

Name SHORE, H. ALLAN

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

ONE SE THIRD AVENUE, 28TH FLOOR

City MIAMI

FL

Zip Code
33131

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)

6/15/01

DATE

9. Capital Contributions

as Shown on record. \$10,805,190.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT #

P96000100236

NAME

M&I COWAN INVESTMENTS, INC.

STREET ADDRESS

3725 SOUTH OCEAN DRIVE, SUITE 718

CITY-ST-ZIP

HOLLYWOOD, FL 33019

STREET ADDRESS

CITY-ST-ZIP

500004448465

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DOCUMENT #

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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 #

6/18/01

FILED
01 JUN 20 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

AMENDED
2001
UBR

AR-52.50

BR

03E003 (11/00)