

# 2000 UNIFORM BUSINESS REPORT (UBR)

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**DOCUMENT # A96000002343**

1. Entity Name  
**3F-LINDA LIMITED PARTNERSHIP**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 FEB -2 AM 8:48



Principal Place of Business 7326 COLLINS AVENUE MIAMI BEACH FL 33141	Mailing Address 7326 COLLINS AVENUE MIAMI BEACH FL 33141-2712
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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 **65-0744904**      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

7. Name and Address of New Registered Agent

**FREEMAN, STEPHEN A**  
**C/O FREEMAN, BUTTERMAN & HABER**  
**520 BRICKELL KEY DRIVE, SUITE 0-305**  
**MIAMI FL 33131**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **\$950,000.00**

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **P96000101605**  
NAME **JERIKA PROPERTIES II, INC.**  
STREET ADDRESS **9509 HARDING AVENUE**  
CITY - ST - ZIP **MIAMI BEACH FL 33154**

STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT # **P96000100287**  
NAME **3F HOLDING II, INC.**  
STREET ADDRESS **520 BRICKELL KEY DRIVE, SUITE 0-305**  
CITY - ST - ZIP **MIAMI FL 33131**

STREET ADDRESS **400003124894-7**  
CITY - ST - ZIP **-02/04/00-01109 007**  
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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 REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date **1/11/00** Daytime Phone # **305-865-1709**

11-00000-001