

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A97000000666**

1. Entity Name

B.P. COMMERCIAL LIMITED PARTNERSHIP

FILED
May 25, 2002 8:00 A.M.
Secretary of State

Principal Place of Business

P.O. BOX 28134

PANAMA CITY FL 32411-8134

Mailing Address

P.O. BOX 28134

PANAMA CITY FL 32411-8134

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

59-3433434

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

SARAH HELENE SHARP

25 SE SECOND AVE., SUITE 1020

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

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

DATE

9. Capital Contributions as Shown on record.

\$0.00

10. Amount of Capital Contributions in FLORIDA to date.

0.00

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 # **P97000022751**
NAME **B.P. TANGO INC.**
STREET ADDRESS **3900 MARRIOTT DRIVE, SUITE K**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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: **SARAH HELENE SHARP** April 30, 2002 (305)372-5900

SIGNATURE AND TYPED OR PRINTED NAME OF SECRETARY, B.P. Tango Inc.

Daytime Phone #

CR2E003 (9/01)