

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000000909

1. Entity Name

HOLLYWOOD (CSC-MANAGEMENT) LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 28 AM 3: 05



DO NOT WRITE IN THIS SPACE

Principal Place of Business

~~200 S. PARK ROAD, #200~~
~~HOLLYWOOD FL 33021~~

Mailing Address

~~200 S. PARK ROAD, #200~~
HOLLYWOOD FL 33021-0541

2. Principal Place of Business

300 Hollywood Way

3. Mailing Address

300 Hollywood Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Hollywood, Florida

City & State
Hollywood, Florida

4. FEI Number 65-0783987

Applied For

Not Applicable

Zip Country
33021 USA

Zip Country
33021 USA

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

~~PASTERNAK, MARSHALL R~~
~~1221 BRICKELL AVE., SUITE 2100~~
~~MIAMI FL 33134~~

Name
Theodore R. Stotzer, Esq.

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

City Zip Code
Hollywood, FL 33021

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)

DATE

9. Capital Contributions \$100.00
as Shown on record.

10. Amount of Capital Contributions \$100.00
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 # P97000036930
NAME SREG SC MANAGEMENT, INC.
STREET ADDRESS ~~200 S. PARK ROAD, #200~~
CITY - ST - ZIP ~~HOLLYWOOD FL 33021~~

STREET ADDRESS 300 Hollywood Way
CITY - ST - ZIP Hollywood, Florida 33021

DOCUMENT #
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Theodore R. Stotzer, Exec VP 4/25/00 (954) 981-1000

Date

Daytime Phone #