2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # A9700000938 1. Entity Name FASK REALTY LTD.						FILED 2003 APR 23 PM 2: 28 DIVISION OF CORPORATIONS TALEAHASSEE, FLORIDA					<u>></u>
Principal Place of Business 354 HIATT DRIVE 354 HIATT DRIVE PALM BEACH GARDENS FL 33418 Mailing Address 354 HIATT DRIVI PALM BEACH GARDENS FL 33418											l
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2003					_
City & State			City & State			4. FEI Number	·			Applied For	
Zip Country		Zip Coun		itry	5. Certificate of Status Desired \$8.75 Addit Fee Required			Additional			
	6. Name	and Address of Current F	legistered Agent	.l	L	.7. Name and A	ddress of New R	egistered Ag	ent		ゴ
CDICDAAAN CTCUCAI					Name						
Friedman, Steven 24 Bermuda Lake Drive					Street Address	et Address (P.O. Box Number is Not Acceptable)					
PALM BE	ACH GARD	ENS FL 33418					·-	5	٠		7
•					City			FL	Zip C	Code	1
	named entity tions of regist		the purpose of changing its	registere	ed office or registe	red agent, or both,	in the State of Flo	rida. I am far	niliar wi	ith, and accept	7
SIGNATURE .	Signature, typed	or printed name of registered agent a	nd title if applicable.			<u> </u>		DATE			
9. Capital Contributions as Shown on record. \$1,000.00 In FLORIDA to date.					butions		11. MAKE CHECK				
as or lown	A	GENERAL PARTNER TI	HAT IS A BUSINESS EN	ITITY M	UST BE REGIS	TERED AND AC	TIVE WITH THE	E SIDE FOR I S OFFICE.		VKMATIUN	1
12.	NOTE	GENERAL PARTNER	NOT be changed on the	he form	; an amendmer	nt must be filed	to change a ge ADDRESS CHA		er.		_
DOCUMENT #		GENERAL PARTINER	INFORMATION				ADDRESS CHA	INGES CIVER			∣ନ୍ନ
NAME STREET ADDRESS	ABRAMS, MARK J 8667 STEEPLECHASE DRIVE			1	EET ADDRESS					<u></u>	CR2E003 (10/02)
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418			CITY	-ST-ZIP	400016794694					
DOCUMENT # NAME	FRIEDMAN, IRVING			STRE	ET ADDRESS	04/23/0	301043	008 **	141.	25 	
STREET ADDRESS CITY-ST-ZIP		AN ISLE DRIVE ACH GARDENS FL 3341	8	CITY	-ST-ZIP						
DOCUMENT # NAME		N, STEVEN D		STRE	ET ADDRESS						
STREET ADDRESS CITY-ST-ZIP					-ST-ZIP		-				
DOCUMENT # NAME	SAYRE, ROBERT A				ET ADDRESS	- Some	eset T	CRA	LE		
STREET ADDRESS CITY-ST-ZIP		ILEY PLACE ION FL 33414	СІТУ		-ST-ZIP Pp	IN BEACH GARDENS, FL 37418					
DOCUMENT # NAME				STRE	ET ADDRESS			·•	•		
STREET ADDRESS CITY-ST-ZIP	,			CITY-	-ST-ZIP						
DOCUMENT # NAME				STRE	ET ADDRESS						
STREET ADDRESS CITY-ST-ZIP				CiTY-	-ST-ZIP						
14. I hereby condicated the receiv	certify that the on this repor er or trustee	information supplied with t t is true and accurate and t empowered to execute this	his filing does not qualify for nat my signature shall have report as required by Chap	r the exer the same ter 620, F	mption stated in Se legal effect as if n liorida Statutes	ection 119.07(3)(i), nade under oath; t	Florida Statutes. I hat I am a General	further certify Partner of the	e limited	d partnership o	r

URE AND TYPES OR PRINTED NAME OF SIGNING GENERAL PARTNER