

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000001039

1. Entity Name

OCSAB LIMITED PARTNERSHIP

Principal Place of Business

3525 S. OCEAN BLVD., #309
S. PALM BEACH FL 33480

Mailing Address

3525 S. OCEAN BLVD., #309
S. PALM BEACH FL 33480

APPROVE:
AND
FILED

02 MAR 27 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

9833 CORONADO LAKE DR 9833 CORONADO LAKE DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

BOYNTON BEACH, FL

City & State

BOYNTON BEACH, FL

4. FEI Number

59-3482214

Applied For

Not Applicable

Zip

Country

33437 USA

Zip

Country

33437 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

KOWALCHUK, WILLIAM P

3525 S. OCEAN BLVD., #309
S. PALM BEACH FL 33480

Name

KOWALCHUK, WILLIAM P.

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

9833 CORONADO LAKE DRIVE

City

BOYNTON BEACH

FL

Zip Code

33437

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.

\$2,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

1,000

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 #
NAME KOWALCHUK, WILLIAM P
STREET ADDRESS 3525 S. OCEAN BLVD., #309
CITY-ST-ZIP S. PALM BEACH FL 33480

STREET ADDRESS 9833 CORONADO LAKE DRIVE
CITY-ST-ZIP BOYNTON BEACH, FL 33437

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STREET ADDRESS
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:

William P. Kowalchuk

3/10/2002 561-752-3455

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)

0004015 AV

STAPLE CHECK HERE