[™] UN	IFORM BUSINE	SS REPORT	UBR				
DOCUMENT # A9700001515 1. Entity Name					FILED		
THE AN	NE BECKER REAL ESTATE LIMITED			3 APR 30 PM 12:			
Principal Place of Business Mailing Address 2631 N.W. 41ST STREET 2631 N.W. 41ST STRE				TAL	LAHASSEE, FLOR	ATE RIDA	
SUITE B		SUITE B					
GAINESVILLE F	FL 32606	GAINESVILLE FL 32606		·	ein, Head		
2. Principal Place of Business 3. Mailing Address C/O 530 Fifth Av				Klein, Hu		BARKI 1910K RISON GILAN NIQUS ASRI SASE	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 9th Floor			DUE BY MAY 1, 2003		
City & Stat	е	City & State New York, NY		4. FEI Numl	ber 59-3449185	Applied For Not Applicable	
Zip	Country Zip 10036		Country USA	5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current F	legistered Agent		7. Name an	d Address of New Registe	red Agent	
DAVIS, JO	OHN A JR.	Name	Paralegal + Altorney Service Sureau, Inc.				
•	. 41ST STREET, SUITE B	Street Address (P.O. Box Number is Not Acceptable)					
	LLE FL 32606	1					
		<u> </u>	Merritt Dr				
				City Tallahassee FL Zip Code 3230/			
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	gistered agent, or be	oth, in the State of Florida.	am familiar with, and accept		
SIGNATURE Brendan G. Slattery 4/30/03 Signature, typed or printed name of registered agent and like if applicable. DATE DATE							
9. Capital Contributions as Shown on record. \$122,300.00 10. Amount of Capital Contributions in FLORIDA to date.					11. MAKE CHECK PAYA	ABLE TO FL. DEPT. OF STATE E 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.				ADDRESS CHANGES ONLY			
DOCUMENT # NAME	BECKER, ANNE TRUSTEE		STREET ADDRESS	143 Ave	143 Avenue B, Apt. 9G		
STREET ADDRESS CITY-ST-ZIP	2631-B N.W. 41ST STREET GAINESVILLE FL 32606		CITY-ST-ZIP	New York, New York 10009			
DOCUMENT # NAME	DAVIS, JR., JOHN A TRUSTEE	amendment Gila	STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	2631-B N.W. 418T STREET GAINESVILLE FL 32606		CITY-ST-ZIP	400018673124 05/09/0301054021 **526,25			
DOCUMENT # NAME			STREET ADDRESS				
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DOCUMENT # NAME		,	STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP			,	
DOCUMENT / NAME			STREET ADDRESS				

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

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

STAPLE CHECK HERE

212-518-9000