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APPROVED  
AND  
FILED

p.1

**LIMITED PARTNERSHIP  
UNIFORM BUSINESS REPORT (UBR)**

02 MAY 31 PM 2:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # A97000001558

1. Entity Name

GATEWAY BUSINESS CENTRE, LTD.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3093 46<sup>TH</sup> AVE. NORTH

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City &amp; State

City &amp; State

4. FEI Number

Applied For

☒ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

DAVID B. FREEMAN

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

1000 LINCOLN RD. # 206

City

MIAMI BEACH

FL

Zip Code

33139

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.

\$1,107,424

10. Amount of Capital Contributions  
in FLORIDA to date.

\$1,107,424

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

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIPA970000015374  
Gateway Business Centre Management, Inc.  
1000 Lincoln Road # 206  
Miami Beach, FL 33139STREET ADDRESS  
CITY - ST - ZIP

600005695446--8

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIPSTREET ADDRESS  
CITY - ST - ZIP-06/06/02-01095-009  
\*\*\*\*526.25 \*\*\*\*526.25DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIPSTREET ADDRESS  
CITY - ST - ZIP**DO NOT WRITE  
IN THIS SPACE**DOCUMENT #  
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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

David B. Freeman

4/20/02 305-5343274

CR2E003B (12/01)

STAPLE CHECK HERE