

2001 UNIFORM BUSINESS REPORT (UBR)

0007835 AF

DOCUMENT # **A97000001775**

1. Entity Name

LEO GOLDMAN & BEATRICE GOLDMAN FAMILY LIMITED PA

FILED

01 MAR 19 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

2268 SEAGRAPE CIRCLE
COCONUT CREEK FL 33066
*6343 Via De Sonrisa Del Sur
Boca Raton FL 33433*

Mailing Address

2268 SEAGRAPE CIRCLE
COCONUT CREEK FL 33066

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6343 Via De Sonrisa Del Sur

Boca Raton FL

33433

4. FEI Number

65-0781223

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

GOLDMAN, LEO

2268 SEAGRAPE CIRCLE
COCONUT CREEK FL 33066
*6343 Via De Sonrisa Del Sur
Boca Raton FL 33433*

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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
as Shown on record.

\$1,550,000.00

10. Amount of Capital Contribution
in FLORIDA to date.

\$1,550,000

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

DOCUMENT #
NAME **GOLDMAN, LEO**
STREET ADDRESS **2268 SEAGRAPE CIRCLE**
CITY-ST-ZIP **COCONUT CREEK FL 33066**

DOCUMENT #
NAME **GOLDMAN, BEATRICE**
STREET ADDRESS **2268 SEAGRAPE CIRCLE**
CITY-ST-ZIP **COCONUT CREEK FL 33066**

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS *6343 Via De Sonrisa Del Sur*
CITY-ST-ZIP *Boca Raton FL 33433*

STREET ADDRESS *6343 Via De Sonrisa Del Sur*
CITY-ST-ZIP *Boca Raton FL 33433*

STREET ADDRESS
CITY-ST-ZIP
800003891108--9
-03/21/01--01102--016
******526.25 ****526.25**

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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:

Leo Goldman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3-15-01 56 750 038

Date

Daytime Phone #

LEO GOLDMAN

CR2E003 (11/00)