

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

143.50

0015962 AT

DOCUMENT # A97000002041

1. Entity Name
CASTRO COMMERCIAL REAL ESTATE FAMILY LIMITED PARTNERSHIP



FILED

03 APR -7 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
237 SOUTH VOLUSIA AVENUE
ARCADIA FL 33821

Mailing Address
C/O ANDREW AMES
128 WEST OAK STREET
ARCADIA FL 34266

2. Principal Place of Business

231 S. BREVARD

3. Mailing Address

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

ARCADIA FL

City & State

4. FEI Number 59-3476414

Applied For

Not Applicable

Zip

34266

Country

Zip

Country

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

CASTRO, MARIA E
237 SOUTH VOLUSIA AVENUE
ARCADIA FL 33821

Name

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

000015325480

04/07/03--01001--017 **232 50

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Maria E Castro

2/24/03

DATE

9. Capital Contributions as Shown on record.

\$20,500.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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
STREET ADDRESS
CITY-ST-ZIP
CASTRO, MARIA E
237 SOUTH VOLUSIA AVENUE
ARCADIA FL 33821

STREET ADDRESS
CITY-ST-ZIP
231 S. BREVARD AV.
ARCADIA, FL 34266

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
CASTRO, JOSE A SR.
237 SOUTH VOLUSIA AVENUE
ARCADIA FL 33821

STREET ADDRESS
CITY-ST-ZIP
231 S. BREVARD AV.
ARCADIA, FL 34266

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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: X

Maria E Castro

02-24-03

Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE