

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000002381

1. Entity Name

MINN'S FAMILY LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 28 AM 10:48



Principal Place of Business

~~5275 SUFFOLK DRIVE~~
~~BOCA RATON FL 33433~~

Mailing Address

~~5275 SUFFOLK DRIVE~~
~~BOCA RATON FL 33433-1642~~

2. Principal Place of Business

7772 La Mirada Drive

3. Mailing Address

6845 BIG CYPRESS DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Boca Raton, FL

City & State

JUPITER, FL

4. FEI Number

65-0791077

Applied For

Not Applicable

Zip

33433

Country

USA

Zip

33458

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KELLEY, CRAIG I ESQUIRE
4420 BEACON CIRCLE, SUITE 100
WEST PALM BEACH FL 33407

7. Name and Address of New Registered Agent

Name

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

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.

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.

\$1,450,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # P97000066404
NAME M.M. PLASKOVE, INC.
STREET ADDRESS 5275 SUFFOLK DRIVE
CITY - ST - ZIP BOCA RATON FL 33433

13. ADDRESS CHANGES ONLY

STREET ADDRESS 7772 La Mirada Drive
CITY - ST - ZIP Boca Raton, FL 33433
STREET ADDRESS 500003166305--2
CITY - ST - ZIP -03/13/00--0110--014
****526.25 ****526.25

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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:

SIGNATURE OF REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/28/00

Date

(561) 842-3000

Daytime Phone #

CR2E003 (9/99)