	2001	UNIFORM	BUSINESS	REPORT	(UBR)
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DOCU	MENT	# A9700	000	002471				€ میں دوار		سر	nf
JUSTICE INVESTMENT ASSOCIATES, LTD.						FII	ED				
Principal Place of Business Mailing Address					=			19 AM 11:	26		
155 S. MIAMI AVE., SUITE PH-2A MIAMI FL 33130			55 S. Miami ave., Suit	TE PH-2A	01	FFR	12 411	***			
			MIAMI FL 33130			CRETA	RY OF STAL	t.			
						ĪĀŢ	LAHA	RY OF STAT SSEE, FLORI			
2. Principal I	Place of Busi	ness	3.	Mailing Address				! 1001011 101	is letii iseli selii esii		14031 01011 18001 1801 4801
Suite, Apt	. #, etc.		1	Suite, Apt. #, etc.			<u>.</u>	DO NOT WRITE IN THIS SPACE			
City & Sta	te			City & State				4. FEI Number	65-0797684		Applied For Not Applicable
Zip		Country		Zip	Cour	try		5. Certificate of	Status Desired	□ \$8 50	3.75 Additional e Required
	6. Name	and Address of Current	Regis	tered Agent		I		7. Name and A	ddress of New Re		
			-	· · · · · · · · · · · · · · · · · · ·		Name			- 	<u> </u>	
		OVISORS, INC.				Street A	ddress (F	P.O. Box Number i	s Not Acceptable)		
		SUITE PH-2A	•								
MIAMI FL	33130										
						City				FL	Zip Code
8. The above	e named entit	y submits this statement fo	or the p	ourpose of changing its	s register	ed office or	registere	ed agent, or both,	in the State of Flor	ida.	
0.00.47.105								•		•	
SIGNATURE	Signature, typed	or printed name of registered agent	and title	if applicable. (NO	TE: Registere	d Agent signati	re required	when reinstating)		DATE	
9. Capital Co as Shown		\$1,700,000.00		10. Amount of Capi		outions			11. MAKE CHECK		
as Shown		GENERAL PARTNER	ГНАТ	<u> </u>		IIST RE I	PEGIST	EBED VND VC.			EE INFORMATION
	NOTE	General Partners MA	Y NC	T be changed on t	he form	; an ame	ndment	must be filed t	o change a ge	eral partne	er.
12. DOCUMENT #	Dozooo	GENERAL PARTNE	RINFO	PRMATION	13.	1		•	ADDRESS CHA	NGES ONLY	
NAME	P97000080	JUSTICE, INC.			STRE	ET ADDRESS			•	-	
STREET ADDRESS	155 S. MIA	MI AVE., SUITE PH-2A			CITY	-ST-ZIP	•		y		
City-st-zip	MIAMI FL :	33130						80 1	7800C	462:	?: ? _o
DOCUMENT # NAME					STRE	ET ADDRESS			-02/21/(****52	01011	19016
STREET ADDRESS	}				· ·	CT 7(D			****5	6.25 *	***526.25
CITY-ST-ZIP	[Citt	-ST-ZIP		, <u>.</u>			
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STREET ADDRESS					1						
CITY-ST-ZIP					CITY	·ST-ZIP					ı
DOCUMENT#					STRE	ET ADDRESS		-			
NAME Street Address	- 					ŀ	·		·,		
CITY-ST-ZIP					CITY	ST-ZIP					
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STREET ADDRESS CITY-ST-ZIP					CITY-	ST-ZIP					
DOCUMENT #					STRE	T ADDRESS		•			
STREET ADDRESS						<u> </u>					C.
CITY-ST-ZIP						ST-ZIP					•
14. I hereby of indicated the receive	er or trustee	information supplied with is true and accurate and empowered to execute thi	s repo	ing does not qualify fo y signature shall have d as dequired by Chap	the same oter 620, F	legal effectionida Stati	ed in Sec t as if ma utes	ade under oath; th	Florida Statutes. I of at I am a General	Partner of the	that the information fimited partnership or 574-7075
			Z				U			,-	•