

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000002747

1. Entity Name

HORSE'S HEAD, LTD.

Principal Place of Business

3399 PGA BLVD., SUITE 260
PALM BEACH GARDENS FL 33410

Mailing Address

3399 PGA BLVD., SUITE 260
PALM BEACH GARDENS FL 33410

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3493177

Applied For

Not Applicable

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

STONE, HELEN E

3399 PGA BLVD., SUITE 260

PALM BEACH GARDENS FL 33410

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

DATE

9. Capital Contributions
as Shown on record.

\$260,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

504,000

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P97000106144
NAME HORSE'S HEAD, INC.
STREET ADDRESS 3399 PGA BLVD., SUITE 260
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

STREET ADDRESS

CITY-ST-ZIP

500005558635-3

05/20/02-01012-001

***526.25 ***526.25

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4-24-02



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

FILED

2002 MAY -2 PM 2:38

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

May 2, 2002

HORSE'S HEAD, LTD.
3399 PGA BLVD., SUITE 260
PALM BEACH GARDENS, FL 33410

SUBJECT: HORSE'S HEAD, LTD.
Ref. Number: A97000002747

We have received your document for HORSE'S HEAD, LTD. and check(s) totaling \$526.25. However, your check(s) and document are being returned for the following:

You have indicated in block 10 or 7b on the document that the contributions of the limited partners have gone beyond what we currently have on file. A supplemental affidavit must be filed pursuant to chapter 620, Florida Statutes. The filing fee is based on the additional amount of contributions calculated at a rate of \$7 per \$1000 with a minimum filing fee of \$52.50 and a maximum filing fee of \$1750.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 102A00027422

1708.00
11/21 already received
Attn: Jody Bryan