2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 08:00 AM
Secretary of State

DOCUMENT # A98000000284

1. Entity Name
PARK ROW CENTRES LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
TWO DATRAN CENTER, SUITE 1258 9130 SOUTH DADELAND BOULEVARD MIAMI FL 33156	% CENTRES, INC., 2 DATRAN CENTER #1528 9130 S. DADELAND BLVD. MIAMI FL 33156

2. Principal Place of Business	3. Mailing Address
C/O CENTRES INC.	% CENTRES INC.
Suite, Apt. #, etc.: 9130 S. DADELAND BLVD., #1528	Suite, Apt. #, etc.: 9130 S. DADELAND BLVD., #1528
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33156 Country:	Zip: 33156 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number 39-1920568 ☐ 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
PARK ROW CENTRES GP, INC. TWO DATRAN CENTER, SUITE 1258 9130 SOUTH DADELAND BOULEVARD MIAMI FL 33156 US	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 ______________ 03/01/2001
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. 5,000.00

10. Amount of Capital Contributions in FLORIDA to date. 5,000.00

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 # / NAME / STREET ADDRESS / CITY-ST-ZIP	PARK ROW CENTRES GP, INC. 3115 NORTH 124TH STREET, SUITE E BROOKFIELD WI 53005	STREET ADDRESS CITY-ST-ZIP	9130 S. DADELAND BLVD., #1528 MIAMI FL 33156
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CR2E003 (11/00)

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: DAVID K. CHARLTON, SR. VP VAST 03/01/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #