

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2000 8:00 am
Secretary of State

DOCUMENT # **A 98000000424**

Entity Name

West City M. SQ., Ltd.

Principal Place of Business	Mailing Address
West City M. SQ., Ltd. 1840 N. Commerce Pkwy. Ste. 3 Weston, FL 33326	c/o Carey Kramer Company 3265 Meridian Pkwy., Ste. 100 Ft. Lauderdale, FL 33331

Principal Place of Business	3. Mailing Address
	1840 N. Commerce Pkwy.

Suite, Apt. #, etc.	Suite, Apt. #, etc.
	Suite 3

City & State	City & State
	Weston, FL

Zip	Country	Zip	Country
		33326	USA

4. FEI Number	Applied For
65-0812868	Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

K. Lawrence Gragg
c/o White & Case LLP
200 S. Biscayne Blvd., Ste. 4900
Miami, FL 33131

7. Name and Address of New Registered Agent

Name
Kenneth H. Simigran, c/o Carey Kramer Company


Street Address (P.O. Box Number is Not Acceptable)
1840 N. Commerce Pkwy.

Suite 3

City
Weston

FL Zip Code
33326

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		Kenneth H. Simigran	4/28/00
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating) DATE	

Capital Contributions as Shown on record.	594,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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.

GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
ST-ZIP	P98000013214 West City M. SQ., Inc. 3265 Meridian Pkwy., Ste. 100 Ft. Lauderdale, FL 33331	STREET ADDRESS	1840 N. Commerce Pkwy., Ste. 3
		CITY-ST-ZIP	Weston, FL 33326
ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	
ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	
ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	
ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	
ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	

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:		Kenneth H. Simigran	4/28/00	(954) 389-7822
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date	Daytime Phone #	

CR2E003 (9/99)