2002	2 UNI	FORM BUSI	NESS	REPORT	r (UBR)	_				
DOCUI 1. Entity Nam	ie	•	00009	FILED						
SAMENE	ETT CAPITA	AL LTD.				02 FEB 18 PM 4: 04				
Principal Place of Business 4900 VAN BUREN STREET HOLLYWOOD FL 33021			Mailing Address 4900 VAN BUREN STREET HOLLYWOOD FL 33021			SECRETARY OF STATE TALLAHASSEE, FLORIDA				
- B''IB			La Marie							
2. Principal Place of Business			3. Mailing Address			(1242)				_
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2002				
City & State			City & State			4. FEI Number 65-0841978 Applied For Not Applicable				- -
Zip Country		Zip	Zip Coun					.75 Additional		
6. Name and Address of Current Registered Agent					Name . A	7. Name and A	ddress of New Regi	stered Age	nt	$\exists$
NETTINA, RICHARD P 4900 VAN BUREN STREET HOLLYWOOD FL 33021					Street Address (P.O. Box Number is Not Acceptable)					
11000	000 12 00	<b>42.</b>			City			FL	Zip Code	-
3. The above	Rose	y submits this statement for	chodi	changing its regist	tered office or regist	ered agent, or both	in the State of Florida	a.		
9. Capital Contributions as Shown on record.  \$2,500,000.00 in FLORIDA to date					ntributions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION				
		GENERAL PARTNER T							nr.	1
12.		GENERAL PARTNER			3.		ADDRESS CHANG			٦,
OCUMENT # IAME	P9800000 SAMENE	03814 TT CORP.		s	STREET ADDRESS					3
STREET ADDRESS CITY-ST-ZIP	4900 VAN BUREN ST HOLLYWOOD FL 33021			С	CITY-ST-ZIP					
OCUMENT # IAME	•			s	STREET ADDRESS					1
itreet address htty-st-zip					CITY-SI-ZIP	2000049909326 -02/22/0201044013				
OCUMENT #				S	STREET ADDRESS	-02/22/0201044013 ****526.25 ****526.25				-
TREET ADDRESS :				С	CITY-ST-ZIP					
OCUMENT #				s	STREET ADDRESS					
STREET ADORESS CITY-ST-ZIP				c	CITY-ST-ZIP					
OCUMENT #	nt #				STREET ADDRESS					
TREET ADDRESS TY-ST-ZIP				С	CITY-ST-ZIP					1
OCUMENT #*				· s	TREET ADDRESS					1
STREET ADDRESS				С	HTY-ST-ZIP					7
indicated the receive	on this repo er or trustee	e information supplied with nt is true and accurate and t empowered to execute this	hat my signature report as requir	e shall have the sa red by Ch <u>a</u> pter 620	ime legal effect as if	Section 119.07(3)(i), made under oath; i	Florida Statutes. I fur hat I am a General Pa	ther certify artner of the	that the information limited partnership o	я

2/12/02 Date

Daytime Phone #