## **2001 UNIFORM BUSINESS REPORT (UBR) FILED** Jun 20, 2001 08:00 AM DOCUMENT # A9800000984 1. Entity Name **Secretary of State** ERDIC USA PARTNERS, LTD. Principal Place of Business Mailing Address 2119 BOOT LAKE CIRCLE 2119 BOOT LAKE CIRCLE 33612 33612 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3506338 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VAN OUWERKERK ROBERT Street Address (P.O. Box Number is Not Acceptable) 2119 BOOT LAKE CIRCLE TAMPA FL33612 US Zip Code City 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. 06/20/2001 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 100.00 as Shown on record. in FLORIDA to date. 100.00 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 ADDRESS CHANGES ONLY CR2E003 (11/00) DOCUMENT # STREET ADDRESS ERDIC USA, L.C. NAME STREET ADDRESS 2119 BOOT LAKE CIRCLE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33612 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS 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

MGR

06/20/2001

Davtime Phone #

SIGNATURE: ROBERT VAN OUWERKERK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER