

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A98000001080**

1. Entity Name

053, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 28 PM 6:43

Principal Place of Business

**1400 EAST NEWPORT CENTER DRIVE, STE. 209
DEERFIELD BEACH FL 33442**

Mailing Address

**1400 EAST NEWPORT CENTER DRIVE, STE. 209
DEERFIELD BEACH FL 33442-7713**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1350 E. Newport Center

3. Mailing Address

PO BOX 4219

Suite, Apt. #, etc.

Suite 206

Suite, Apt. #, etc.

City & State

Deerfield Beach, FL

City & State

Deerfield Beach, FL

Zip

33442

Country

USA

Zip

33442-4219

Country

USA

4. FEI Number

06-1514268

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

KAY, JAMES R ESQ.

C/O AKERMAN, SENTERFITT & EIDSON, P.A.

777 SOUTH FLAGLER DR., STE. 900, EAST TWR

WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$2,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

**11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

**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

DOCUMENT # **P98000038492**
NAME **053, INC.**
STREET ADDRESS **1400 EAST NEWPORT CENTER DRIVE, STE. 209**
CITY - ST - ZIP **DEERFIELD BEACH FL 33442**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS **1350 E. Newport Center Dr. Ste 206**

CITY - ST - ZIP **Deerfield Beach, FL 33442**

STREET ADDRESS

CITY - ST - ZIP

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**100003241601--7
-05/05/00--01097--007
****535.00 ****535.00**

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: **Linda G. Kassof** **REQUIRED** **Linda G. Kassof 4/27/00**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #