2002 UNIFORM BUSINESS REPORT (UBR)							APPROVE		
DOCUMENT # A9800001529 1. Entity Name						- AND FILED			
ADC EQUITY PARTNERS IBIS, LTD.						02 APR 16 AM 8: 47			
Disciple Research							SECRETARY OF STATE TABLE AHASSEE, FLORIDA		
Principal Place of Business 2201 CORPORATE BLVD N.W SUITE 200 BOCA RATON FL 33431 BOCA RATON FL 33431 Mailing Address 2201 CORPORATE BLVD BOCA RATON FL 33431) N.W., S	SUITE 200		1831	
Principal Place of Business 3. Mailing Address						 .			
Suite, Apt. #, etc. Suite, Apt. #, etc.							DUE BY MAY 1, 2002		
City & State				City & State			4. FEI Number 65-0851661 Applied Fo		
Zip				Zip	Country		5. Certificate of Status Desired S8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent						Name	7. Name and Address of New Registered Agent		
BROAD AND CASSEL C/O JEFFREY A. DEUTCH						Street Address (P.O. Box Number is Not Acceptable)			
7777 GLADES ROAD, SUITE 300									
BOCA RATON FL 33434						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.						DATE			
9. Capital Contributions as Shown on record. \$29,866.00 In FLORIDA to day					ate.		11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION		
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE R NOTE: General Partners MAY NOT be changed on the form; an amen						UST BE REC	EGISTERED AND ACTIVE WITH THIS OFFICE.		
12. GENERAL PARTNER INFORMATION					13.				
DOCUMENT / NAME STREET ADDRESS	ALTMAN DEVELOPMENT CORPORATION 2201 CORPORATE BLVD., N.W., SUITE 200 BOCA RATON FL 33431				STRE	STREET ADDRESS			
CITY-ST-ZIP DOCUMENT #					CITY-	ST-ZIP	6000053277160		
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STREET ADDRESS CITY-ST-ZIP					CITY-	ST-ZIP		\dashv	

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

ALTMAN DEVELOPMENT CORPORATION, GENERAL PARTNER

SIGNATURE:

BY:

SIGNATURE:

BY:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

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