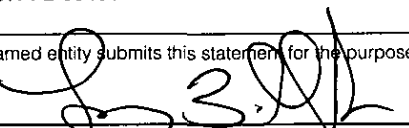


2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT 1


DOCUMENT # A98000001795			
1. Entity Name ATLANTIC PLAZA II, LTD.			
Principal Place of Business C/O SUMMIT REALTY & DEVELOPMENT CORP. 200 WEST PALMETTO PARK ROAD. #301 BOCA RATON FL 33432		Mailing Address C/O SUMMIT REALTY & DEVELOPMENT CORP. 200 WEST PALMETTO PARK ROAD. #301 BOCA RATON FL 33487-2777	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address 6700 NW BROKEN SOUND PKWY Suite, Apt. #, etc. SUITE 201 City & State BOCA RATON, FLORIDA Zip 33487 Country	
6. Name and Address of Current Registered Agent HANDLER, HENRY B 1 BOCA PLACE, SUITE 218A 2255 GLADES ROAD BOCA RATON FL 33431		7. Name and Address of New Registered Agent Name Larry Z. Glickman Street Address (P.O. Box Number is Not Acceptable) 301 Yamato Road Suite Suite 4150 City Boca Raton FL Zip Code 33431	
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  DATE 3/30/00 <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
9. Capital Contributions as Shown on record. \$75,000.00		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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P98000065998 ADREAC HOLDINGS, INC. 4568 BOCAIRE BLVD. BOCA RATON FL 33487	STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -1 PM 12:06



DO NOT WRITE IN THIS SPACE

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:  JERRY VAN <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	Date 1/25/00 Daytime Phone # 561-994-0919

FORM 1001 (1/99)