

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000001869

1. Entity Name

ELMOR ASSOCIATES, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR -7 PM 12: 36

Principal Place of Business
C/O IRVING SHIMOFF
200 S BISCAYNE BLVD., SUITE 1050
MIAMI FL 33131

Mailing Address
5500 COLLINS AVENUE, SUITE 302
MIAMI BEACH FL 33140-2537



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

4. FEI Number **11-2303164** Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SHIMOFF, IRVING
200 S BISCAYNE BLVD., SUITE 1050
MIAMI FL 33131

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **\$902,237.00**

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	P98000042451 LIGHT PROPERTIES, INC. 5500 COLLINS AVENUE, SUITE 302 MIAMI BEACH FL 33140	STREET ADDRESS CITY - ST - ZIP	700003178157 1 -03/21/00-01032-011 ****526.25 ****526.25
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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

LIGHT PROPERTIES INC, GENERAL PARTNER, BY HERBERT LIECHTNER, ITS PRESIDENT

SIGNATURE: *Herbert Liechtnr* **SIGNATURE REQUIRED** *3-2000*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR29003 (9/99)