

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # A9800002241

1. Entity Name:

STANFILL HOLDINGS, LTD.

02 MAY -1 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
10545 S. Dixie Hwy.

3. Mailing Address
10545 S. Dixie Hwy.

DO NOT WRITE IN THIS SPACE

State, Apt. #, etc.

State, Apt. #, etc.

DUE BY MAY 1

City & State:
Miami, FL 33156

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Miami, FL 33156

4. FEI Number
65-0875536

Amount of Fee
Not Applicable

Zip Country

Zip Country

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

DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Steve L. Stanfill, Jr.
Street Address (P.O. Box Number if Not Applicable): 10545 S. Dixie Hwy.
City: Miami FL 33156

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

9. Capital Contributions as Stated on Record \$1,300,000.00

10. Amount of Capital Contributions in FLORIDA to date \$1,300,000.00

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

1. NAME: Stanfill Holdings, Inc.
2. STREET ADDRESS: 10545 S. Dixie Hwy.
3. CITY & STATE: Miami, FL 33156
4. FEI NUMBER: P98000073075

5. NAME: [Blank]
6. STREET ADDRESS: [Blank]
7. CITY & STATE: [Blank]

8. NAME: [Blank]
9. STREET ADDRESS: [Blank]
10. CITY & STATE: [Blank]

11. NAME: [Blank]
12. STREET ADDRESS: [Blank]
13. CITY & STATE: [Blank]

14. NAME: [Blank]
15. STREET ADDRESS: [Blank]
16. CITY & STATE: [Blank]

17. NAME: [Blank]
18. STREET ADDRESS: [Blank]
19. CITY & STATE: [Blank]

20. NAME: [Blank]
21. STREET ADDRESS: [Blank]
22. CITY & STATE: [Blank]

23. NAME: [Blank]
24. STREET ADDRESS: [Blank]
25. CITY & STATE: [Blank]

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DO NOT WRITE
IN THIS SPACE

SIGNATURE:

[Handwritten Signature]

4/29/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Entity Name

GREENSB (12/01)

STAPLE CHECK HERE