

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000002914

1. Entity Name
SCHECTER GATEWAY LTD.



FILED
03 APR 22 AM 8:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

Principal Place of Business
1060 N. NORTHLAKE DRIVE
HOLLYWOOD FL 33019

Mailing Address
1060 N. NORTHLAKE DRIVE
HOLLYWOOD FL 33019

2. Principal Place of Business

19333 W. Country Club Drive

3. Mailing Address

19333 W. Country Club Dr.

Suite, Apt. #, etc.

922

Suite, Apt. #, etc.

922

City & State

Aventura, FL

City & State

Aventura, FL

Zip

33180

Country

Zip

33180

Country

DUE BY MAY 1, 2003

4. FEI Number 65-0884238

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GLASSER, GENE K
C/O ABRAMS ANTON P.A.
2021 TYLER STREET
HOLLYWOOD FL 33022

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$1,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
SCHECTER, AARON
1060 N. NORTHLAKE DRIVE
HOLLYWOOD FL 33019

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP
19333 W. Country Club Drive, # 922
Aventura, FL 33180

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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:

Signature of Aaron Schechter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/29/03

Date

954-921-6111

Daytime Phone #

CR2E003 (10/02)

0009166 AT

STAPLE CHECK HERE