## **2003 LIMITED PARTNERSHIP** UNIFORM BUSINESS REPORT (UBR) A99000000055 DOCUMENT #

1. Entity Name RAHWAY GROUP, LTD.

Principal Place of Business 9264 VISTA DEL LAGO. #24-A **BOCA RATON FL 33428** 

Mailing Address 9264 VISTA DEL LAGO. #24-A **BOCA RATON FL 33428** 

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SECRETANY JESTATE TALLAHASSEE FLORIDA

2. Principal Place of Business			3. Mailing Address			7/18		
Suite, Apt. #	#, etc.		Suite, Apt. #, etc.			DUE BY MAY 1, 2003		
City & State	)		City & State			4. FEI Number 65-0886040 Applied For Not Applicable:		
Zip		Country	Zip	7 <b>-</b> 1	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent		
					Name	Name		
HARRIS, RUTH A					Street Addi	ess'(P.O. Box Number is Not Acceptable)		
9264*/STA DEL LAGO, #24-A								
BOÇA RA	TON FL 33	428						
·•					City	FL Zip Code		
8. The above the obligati	named entitions of regist	y submits this statement for ered agent.	r the purpos	se of changing its	registered office or re	gistered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE -	<u> </u>	and the distance of conjutered agent	and title if annlic	able	· · · · · · · · · · · · · · · · · · ·	DATE		
Signature, typed or printed name of registered agent and title if applicable.  9. Capital Contributions as Shown on record.  10. Amount of Capital in FLORIDA to date					al Contributions late. X\$QQXXXX	XXX \$750,000 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE		
as onewit		GENERAL PARTNER	TIATIC A	DUCINESS EN	ITITY MUST BE RE	GISTERED AND ACTIVE WITH THIS OFFICE. Iment must be filed to change a general partner.		
12. GENERAL PARTNER INFORMATION					13.	ADDRESS CHANGES ONLY		
DOCUMENT #	P98000106236				STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	TADORESS 9264 VISTA DEL LAGO, #24-A				CITY-ST-ZIP	200012263450		
DOCUMENT #			·		STREET ADDRESS	<u>800012863450</u> 02/20/0301033012 ₩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

SIGNATURE:

SIGNATURE RECEPTES Ident, Rahway Group, Inc.