2002	UNIFO	RM BUSI	NESS REPO	RT	(UBR	)	APPROYE			
DOCUMENT # A9900000107							AND FILED			
						02	02 JUN 1 1 AM 10: 06			
NORTH BEACH THREE, LTD.										
Principal Place	e of Business	<del></del>	Mailing Address			SE	CRETARY OF STA LAHASSEE, FLOR	RIDA		
75 N.E. 6TH AVENUE, SUITE 214 75 N.E. 6TH AVENUE, SUITI						100				
DELRAY BEACH FL 33483 DELRAY BEACH FL 33483				3						
			Ì							
2. Principal Pl	lace of Business	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2002				
City & State			City & State		4. FEI Numbe	65-0889444		olied For Applicable		
Zip	Zip Country		Zip	Zip Country		5. Certificate of	5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				L	7. Name and Address of New Registered Agent					
					Name					
ZENGAGE, JIM 75 N.E. 6TH AVENUE, SUITE 214					Street Address (P.O. Box Number is Not Acceptable)					
DELRAY BEACH FL 33483										
					City		F	Zip Code		
8. The above	named entity submi	ts this statement for	the purpose of changing its	register	ed office or re	egistered agent, or both	n, in the State of Florida.			
		•								
SIGNATURE _	Signature, typed or printed	name of registered agent a	nd title if applicable.				DAT	Ē	<del></del>	
<ol><li>Capital Cor as Shown of</li></ol>		1,250,000.00	<ol> <li>Amount of Capit in FLORIDA to d</li> </ol>		butions		11. MAKE CHECK PAYA SEE REVERSE SIDE			
			HAT IS A BUSINESS EN Y NOT be changed on t							
12.		ENERAL PARTNER		13.		different mast be me	ADDRESS CHANGES			
DOCUMENT #	P97000073252	OTC INC	,	STR	EET ADDRESS				ĺ	
NAME STREET ADORESS	RETAIL CONCEI 75 NE 6TH AVE	NUE, SUITE 214		CIT	/ CT 7/0				è	
CITY-ST-ZIP	DELRAY BEACH	FL 33483		GIIT	/-ST-ZIP					
DOCUMENT # NAME	P9800040670 IRONWOOD DEVELOPMENT CORP.				EET ADDRESS		<u> </u>			
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NAME Street Address	li			0170					<del></del>  .	
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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 20, Florida Statutes

SIGNATURE:

STAPLE CHECK HERE