2001 UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT-# A9900000208 1. Entity Name | | | | | | FILED | | | |
|---|---|---------------------------------|---------------|-----------------|--|---|------------------------------------|---------------------------------|--|
| FONDO NUEVO, LTD. | | | | | | 01 APR 27 PM 1: 44 | | | |
| Principal Place of Business Mailing Address | | | | | | SECRETARY OF STATE | | | |
| 340 ROYAL POINCIANA WAY. SUITE 316 340 ROYAL POINCIANA WAY PALM BEACH FL 33480 PALM BEACH FL 33480 | | | ay. Suit | Y. SUITE 316 | | TACLAHASSEE, FLORIDA | | | |
| | | | | | 1 | | A PANKA IRINK ASIMI ABIMI ABIMI BA | HI ABIN BOND HEND OBIEN AND IBO | |
| 2. Principal Place of Business 3. Mailing Address | | | | | | | | | |
| One North Clematis Street One North | | | mati | s Stre | et | | | | |
| Suite, Apt | • | Suite, Apt. #, etc. | | | | DO NOT WRITE IN THIS SPACE | | | |
| Second City & Star | Floor | Second Floor City & State | | | | TA STANLEY TO | | | |
| • | alm Beach, FL | West Palm Beach, FL | | | ' | 4. FEI Number 65-0899987 Applied For Not Applicable | | | |
| Zip | Country | Zip Country | | | | 5. Certificate of Status Desired \$8.75 Additional | | | |
| 33401 | USA | 33401 | US | A | | | | Fee Required | |
| 6. Name and Address of Current Registered Agent | | | | | 7. Name and Address of New Registered Agent Name | | | | |
| VIOOK IOCEDID ID | | | | name , | | | | | |
| KLOCK, JOSEPH P JR. 200 SOUTH BISCAYNE BLVD., SUITE 4000 | | | | Street Ac | t Address (P.O. Box Number is Not Acceptable) | | | | |
| MIAMI FL 33131 | | | | | | | | | |
| MIN-CIAIL I. C. | 30101 | | | City | | | | Zip Code | |
| | | 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 O4:25:01 | | | | | | | | | |
| SIGNATURE | Signature Apped or printed name it registered agent an | d title if applicable. (NOTE | : Registere | d Agent signatu | re required whe | en reinstating} | DAT | | |
| 9. Capital Co | entributions & CA AND SAN AN | butions | | | 11. MAKE CHECK PAYAS | BLE TO DEPT. OF STATE | | | |
| as Shown | oniecola. | in FLORIDA to da | | \$5,002 | · | <u> </u> | | FOR FEE INFORMATION | |
| | A GENERAL PARTNER TH NOTE: General Partners MAY | | | | | | | | |
| 12. | GENERAL PARTNER | INFORMATION | 13. | | | | ADDRESS CHANGES | ONLY | |
| DOCUMENT # | P99000010574 FONDO NUEVO MANAGEMENT, INC. 340 ROYAL POINCIANA WAY, SUITE 316 PALM BEACH FL 33480 | | | ET ADORESS | _ | 1 | | | |
| NAME STREET ADDRESS | | | | | | One North Clematis Street, Second Floor | | | |
| CITY-ST-ZIP | | | | -ST-ZIP | West | est Palm Beach, FL 33401 | | | |
| DOCUMENT # | | | стог | ET ADDRESS | - - | : | | | |
| NAME | | | | LEI ADURESS | 4,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1 | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | -ST-ZIP | | 4000041385549 -05/07/0101051016 | | | |
| DOCUMENT # NAME | | | | ET ADDRESS | | ****526.25 *****526.25 | | | |
| STREET ADDRESS CITY-ST-ZiP | | | CITY | -ST-ZIP | | | | | |
| DOCUMENT # | | | STRE | ET ADDRESS | | | | | |
| NAME STREET ADDRESS | · | | | } | \rightarrow | h. | | | |
| CITY-ST-ZIP | | | | -ST-ZIP | 1-ZIP / 57/C | | | | |
| DOCUMENT # | | | | ET ADDRESS | -1 | 7 | | | |
| NAME | , | | | _ | • | 100 | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | -ST-ZIP | ١ | 10/2/ | | | |
| DOCUMENT # | | | STRE | ET ADDRESS | | 7 | | | |
| STREET ADDRESS CITY-ST-ZIP | • | | CITY- | -ST-ZIP | | " | | 277777 | |
| 14. I hereby o | Lertify that the information supplied with the | nis filing does not qualify for | the exer | mption state | ed in Section | on 119.07(3)(i). F | Florida Statutes. I further | certify that the information | |
| indicated | on this report is true and accurate and the rer or trustee empowered to execute this | iat my signature shall have ti | he same | legal ettec | t as if made | e under oath; th | at I am a General Partner | of the limited partnership or | |