2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000000257 1. Entity Name						
GREEN ENTERPRISES WORLDWIDE, LTD.			FIL	ED		
Principal Place of Business Mailing Address 01			AR 2	2 AH 9 1	f (\	
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153 SEVILLA AVENUE CORAL GABLES FL 33134 TALLA			EIAI	CEE FLORIDA		
		ŢALLF	this			
2. Principal Place of Business 3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State		City & State			4. FEI Number Applied For NOT APPLICABLE Not Applicable	
Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent	
EDEFILIAL MICHAEL I						
Freeman, Michael J C/O M.J.F. Registered Agent Corp.				Street Address (F	P.O. Box Number is Not Acceptable)	
153 SEVILLA AVENUE						
CORAL GABLES FL 33134				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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
9. Capital Contributions as Shown on record. \$10,000.00 10. Amount of Capital Contributions in FLORIDA to date. 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		13.		ADDRESS CHANGES ONLY	
DOCUMENT / P99000012560			STR	EET ADDRESS		
NAME STREET ADDRESS	CHECK CATER TROCK WORLDWIDE, 1110.			-		
CITY-ST-ZIP	CORAL GABLES FL 33134		CITY	'-ST-ZIP		
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NAME STREET ADDRESS				-ST-ZIP		
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						

305-442-1567

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