## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCU		# A9900	00	00308					drai inc.			
SOUTHERN CENTERS AT FEDERAL, LTD.								FILED SECRETARY OF STATE DIVISION OF CORPORATIONS				
Principal Place of Business 3701 GALT OCEAN DRIVE FORT LAUDERDALE FL 33308				Mailing Address 3701 GALT OCEAN DRIVE FORT LAUDERDALE FL 33316-2191					OMAY-I PI			
								- W				
2. Principal Place of Business 1500 CORDOVA ROAD 3. Mailing Address 1500 CORDOVA						ROAD		1 180 [ ] [ 10				
Suite, Apt. #, etc. 310			Suite, Apt. #, etc. 310						DO NOT WRITE II	N THIS SPA	CE	
City & State FORT LAUDERDALE, FL				City & State FORT LAUDERDALE, FL				4. FEI Number 65 - 0	890508		Applied For Not Applicable	
33316 Country USA		Country USA	Z	Zip 33316 Coun		try SA		5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent						Name=~		7. Name and Ad	dress of New Regis	stered Age	nt 	
SOUTHERN CENTERS DEVELOPMENT CORP. 3701 GALT OCEAN DRIVE						Street Add	Street Address (P.O. Box Number is Not Acceptable) 1500 CORDOVA ROAD, #310					
FORT LAUDERDALE FL 33308						City	Zin.					
	1			City FORT LAUDERDALE, FL Zip Code 33316  stered office or registered agent, or both, in the State of Florida.								
	CHANGE	ADDRESS ONLY	e	M-					In the State of Florida	DATE		
Signature, typed or printed name of reflatered agent and title if applicable. (NOTE: R  9. Capital Contributions  10. Amount of Capital Contributions						d Agent signature butions	e required	when reinstating)	11. MAKE CHECK P	AYABLE TO		
as Shown	Δ	GENERAL PARTNER T	HAT I	in FLORIDA to da	ITY M	UST BE R	EGIST	ERED AND AC	TIVE WITH THIS C	FFICE.	EE INFORMATION	
12.	NOTE	: General Partners MA' GENERAL PARTNER			e form	; an amen	dment	must be filed t	ADDRESS CHANG		F	
P96000073455  SOUTHERN CENTERS DEVELOP					STR	ET ADDRESS	s 1500 CORDOVA ROAD, #310					
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indicated	on this repo	e information supplied with ort is true and accurate and e empowered to execute this	that m	y signature shall have t	he sam	e legal effect Florida Statu 	t as it m ites	ade under oath; tr	nat I am a General Pa	ther certify artner of the	that the information limited partnership or	
SIGNAT	URE: _	SIGNATA		while	ED	RA	nd4	ul Kól	le Maylo		-523-4008	
		SIGNATURE AND TYPED OR	PAINTE	D NAME OF SIGNING GENERA	L PARTNE	;H			Date	Daytin	ne Phone #	