

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000000470

1. Entity Name

EDH RIDGE CHILDREN, LTD.

Principal Place of Business

3400 N.E. 34TH STREET, SUITE 101  
FT. LAUDERDALE FL 33308

Mailing Address

3400 N.E. 34TH STREET, SUITE 101  
FT. LAUDERDALE FL 33308-6908

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR 24 AM 3:05



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0912127

Applied For

Not Applicable

Zip

Country

Zip

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

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

\$6,000.00

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 INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # P98000107328  
NAME EDH RIDGE CORP.  
STREET ADDRESS 3400 N.E. 34TH STREET, SUITE 101  
CITY - ST - ZIP FT. LAUDERDALE FL 33308

STREET ADDRESS

CITY - ST - ZIP

600003249866--3

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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

EDH RIDGE CORP.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  
HOWARD WOLFESKY, PRESIDENT

4/10/00

Date

(954) 568-4118

Daytime Phone #

CR2E001 (9/99)