2002	UNIFORM	Business	REPORT	(UBR)				

DOCU		0000513							
THE GREENBERG GROUP OF SOUTH FLORIDA, LTD.				FILED					
Principal Place of Business Mailing Address				<del> </del>	1	2002 JAN 25	2002 JAN 25 AM 12: 28		
3360 S. OCEAN BOULEVARD. APT. 3B SOUTH PALM BEACH FL 33480  3360 S. OCEAN BOULEVARD PALM BEACH FL 33480  3360 S. OCEAN BOULEVARD PALM BEACH FL 33480		ird. Ap	T. 38 South	DIVISION OF CORPORATIONS TALLAHASSEE ELORIDA					
2. Principal Place of Business 3. Mailing Address				-					
Suite, Apt. #, etc. Suite, Apt. #, e		Suite, Apt. #, etc.			DUE BY MAY 1, 2002				
City & State		City & State		4. FEI Number	65-0908351	Applied For Not Applicable			
Zip	Country	Zip	Country		5. Certificate o	f Status Desired	\$8.75 Additional Fee Required		
	6. Name and Address of Current F	Registered Agent		News	7. Name and Address of New Registered Agent				
OPERADO	TOO MADELVAL			Name	a				
GREENBERG, MADELYN 3360 S. OCEAN BOULEVARD, APT. 3B SOUTH				Street Address	Street Address (P.O. Box Number is Not Acceptable)				
Palm Be	ACH FL 33480								
				City		F	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 a	nd title if applicable.	<del></del>			DATE			
<ol><li>Capital Co as Shown of</li></ol>		<ol> <li>Amount of Capita in FLORIDA to da</li> </ol>		butions		11. MAKE CHECK PAYABI SEE REVERSE SIDE F	OR FEE INFORMATION		
	A GENERAL PARTNER TO NOTE: General Partners MA	HAT IS A BUSINESS ENT Y NOT be changed on th	TITY M	IUST BE REGIS	TERED AND AC	TIVE WITH THIS OFFICE	CE. artner.		
12.	GENERAL PARTNER		13.			ADDRESS CHANGES OF			
DOCUMENT #			STR	EET ADORESS					
NAME STREET ADDRESS CITY-ST-ZIP	GREENBERG, MADELYN 3360 S. OCEAN BOULEVARD, APT. 3B SOUTH PALM BEACH FL 33480		CITY	'-ST-ZIP					
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STREET ADDRESS CITY-ST-ZIP			CITY	'-ST-ZIP		****526.25	****526.25		
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DOCUMENT #			STR	EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP					
indicated	certify that the information supplied with on this report is true and accurate and yer or trustee empowered to execute this	hat my signature shall have th	he sam	e legal effect as if (	ection 119.07(3)(i), made under oath; i	Florida Statutes. I further ca hat I am a General Partner of	ertify that the information of the limited partnership or		

SIGNATURE: Madely Signature and typed on printed Name of Signature and typed on Printed Name of Signature of Signature and typed on Printed Name of Signature of Signature and Typed on Printed Name of Signature of