

2001 UNIFORM BUSINESS REPORT (UBR)

0002735 AF

DOCUMENT # A99000000632

1. Entity Name

BUCH INVESTMENTS, LTD.

Principal Place of Business

C/O WEISS & HANDLER, P.A.
2255 GLADES ROAD, SUITE 218-A
BOCA RATON FL 33431

Mailing Address

1950 SOUTH OCEAN DRIVE, APT. 7G
HALLANDALE FL 33009

FILED

01 APR 16 PM 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature

2. Principal Place of Business

2021 Tyler Street

3. Mailing Address

P.O. Box 229010

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Hollywood, Florida

City & State

Hollywood, Florida

4. FEI Number

65-0925163

Applied For

Not Applicable

Zip
33020

Country
Broward

Zip
33020

Country
Broward

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HANDLER, HENRY B ESQ.
C/O WEISS & HANDLER, P.A.
2255 GLADES ROAD, SUITE 218-A
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name: Gene K. Glasser, Esq.

Street Address (P.O. Box Number is Not Acceptable)
2021 Tyler Street

City Hollywood

FL

Zip Code
33020

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

Handwritten signature

(NOTE: Registered Agent signature required when reinstating)

DATE

4/13/2001

9. Capital Contributions as Shown on record.

\$990.00

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

DOCUMENT # P99000035346
NAME BUCH INVESTMENTS, INC.
STREET ADDRESS 1950 SOUTH OCEAN DRIVE, APT. 7G
CITY-ST-ZIP HALLANDALE FL 33009

13. ADDRESS CHANGES ONLY

STREET ADDRESS 2021 Tyler Street
CITY-ST-ZIP Hollywood, -Florida 33020

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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

SIGNATURE:

Handwritten signature

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)