

2001 UNIFORM BUSINESS REPORT (UBR)

0006139 AF

DOCUMENT # A99000001027
 1. Entity Name
 V-P CONSTRUCTION, LTD.

FILED

01 JUL 30 AM 8:47
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



Principal Place of Business
 7875 S.W. 40 ST., SUITE 223
 MIAMI FL 33155

Mailing Address
 7875 S.W. 40 ST., SUITE 223
 MIAMI FL 33155

2. Principal Place of Business
 7344 S.W. 48 Street
 Suite, Apt. #, etc.
 Suite 203
 City & State
 MIAMI FL

3. Mailing Address
 7344 S.W. 48 Street
 Suite, Apt. #, etc.
 Suite 203
 City & State
 MIAMI FL

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0933102
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 PRENDES, GEORGE
 7875 S.W. 40 ST., SUITE 223
 MIAMI FL 33155

7. Name and Address of New Registered Agent
 Name: Promdes George
 Street Address (P.O. Box Number is Not Acceptable): 7344 S.W. 48 Street
 Suite 203
 City: MIAMI FL Zip Code: 33155

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: DATE: 7-6-01

9. Capital Contributions as Shown on record. \$0.00
 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 #	P97000049750
NAME	GBS DEVELOPMENT & MANAGEMENT CO.
STREET ADDRESS	7875 S.W. 40 ST., SUITE 223
CITY-ST-ZIP	MIAMI FL 33155
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	7344 S.W. 48 Street
CITY-ST-ZIP	Suite 203 MIAMI FL 33155
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	800004514628--1
CITY-ST-ZIP	-08/03/01--01083--017 ****541.25 ****541.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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: SIGNATURE REQUIRED
 Date: 7-6-01 Daytime Phone #: (305) 67-6060

CR2F003 (11/00)