2002 UNIFORM BUSINESS REPORT (UBR)

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7344 S.W. 48TH STREET. STE. 200 MAM FL 33155  2. Principal Place of Business  Sulls, Apt #, etc.  Sulte, Apt #, etc.  Sulte, Apt #, etc.  Sulte, Apt #, etc.  DUE BY MAY 1, 2002  City & State  Country  S. Certificate of Status Desired  6. Name and Address of Current Registered Agent  PRENDES, GEORGE 7344 S.W. 48TH STREET  Sulte 203  MAM FL 33155  Sulte, Apt #, etc.  DUE BY MAY 1, 2002  Applied For Not Ap							S	ECRETARY	OF STATI	E		
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Zip Country Zip Country S. Certificate of Status Desired S8.75 Additional Fee Required  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. Name 7. Name and Address of New Registered Agent 8. Street Address (P.O. Box Number is Not Acceptable)  7. Name and Address of New Registered Agent 8. Name 8. Street Address (P.O. Box Number is Not Acceptable)  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.  8. GISNATURE 8. Signature, typed or prived name of registered agent and titor augicitable.  9. Capital Contributions 8. Sound or record.  9. Capital Contributions 8. Sound or record.  11. MAKE CHECK PAYABLE TO DEPT. OF STATE 8. REVERSE SIDE For REI INFORMATION 1. ACCEPTABLE TO DEPT. OF STATE 8. REVERSE SIDE For REI INFORMATION 1. ACCEPTABLE TO DEPT. OF STATE 9. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner.  12. GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS DEFICE.  NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner.  12. GENERAL PARTNER INFORMATION 1. ADDRESS CHANGES ONLY  97000049750 GBS DEVELOPMENT & MANAGEMENT CO. THE ADDRESS ONLY STREET ADDRESS ONLY STREE	City & State			City & State	City & State			FE-0022102				
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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	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS STREET ADDRESS				CITY	-ST-ZIP  ET ADDRESS				***************************************		

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