

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000001202**

1. Entity Name

**HERALD PLAZA, LTD.**

APPROVED  
AND  
FILED

01 MAY -1 PM 6:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
1096 E. NEWPORT CENTER DRIVE, STE. 100  
DEERFIELD BEACH FL 33442

Mailing Address  
1096 E. NEWPORT CENTER DRIVE, STE. 100  
DEERFIELD BEACH FL 33442

2. Principal Place of Business  
**2000 N.W. 150th AVE**

3. Mailing Address  
**791 Park of Commerce Dr.**

Suite, Apt. #, etc.

City & State  
**Pembroke Pines**

City & State  
**Boca Raton**

Zip  
**33028**

Country  
**Broward**

Zip  
**33487**

Country  
**Palm Beach**

4. FEI Number  
**65-0957752** ✓

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**BUTTERS, MALCOLM**  
1096 E. NEWPORT CENTER DRIVE, STE. 100  
DEERFIELD BEACH FL 33442

7. Name and Address of New Registered Agent

Name  
**EIK, Scott A ESQ**

Street Address (P.O. Box Number is Not Acceptable)  
**90 EIK, Bankier, Palmer & Christu**

**4800 N. Federal Hwy Suite 200E**

City  
**Boca Raton** **FL** Zip Code  
**33431**

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 **SCOTT A. EIK**

Signature, typed or printed name of registered agent and title if applicable.

(NOT: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.  
**\$1,244,600.00**

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 # **L99000004473**

NAME  
**BUTTERS HERALD PLAZA, LLC**

STREET ADDRESS  
**1096 E. NEWPORT CENTER DRIVE, STE. 100**

CITY-ST-ZIP  
**DEERFIELD BEACH FL 33442**

13. ADDRESS CHANGES ONLY

DOCUMENT # **L99000004622**

NAME  
**MILHOUS ASSOCIATES LLC**

STREET ADDRESS  
**1096 E. NEWPORT CENTER DRIVE, STE. 100**

CITY-ST-ZIP  
**DEERFIELD BEACH FL 33442**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS  
**000004275390--5**

CITY-ST-ZIP  
**-05/22/01--01013--004**  
**\*\*\*526.25 \*\*\*526.25**

DOCUMENT #

NAME

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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: **Scott A. Eik**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**4-30-01**

Date

Daytime Phone #

0008140 AF

CR2E003 (11/00)