

# **LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # A99000001202

1. Entity Name

Herald Plaza, LTD

02 APR 29 PM 4:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

2000 N.W. 150th Ave

3. Mailing Address

791 Park of Commerce Dr

DO NOT WRITE IN THIS SPACE

**DUE BY MAY 1**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

65-0957752

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

City & State

Pembroke Pines, FL

City & State

Boca Raton FL

Zip

33028

County

Broward

Zip

33487

Country

Palm Beach

7. Name and Address of Current Registered Agent

Name

Elk, Scott A. Esq

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

% Elk Banker & Christa

4800 N Federal Hwy Suite 200 E

City

Boca Raton

FL

Zip Code

33431

**DO NOT WRITE  
IN THIS SPACE**

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

DATE

9. Capital Contributions  
as Shown on record.

881,070

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 #

NAME

STREET ADDRESS

CITY - ST - ZIP

Milhaus Leasing Company  
791 Park of Commerce Dr  
Boca Raton FL 33487

STREET ADDRESS

CITY - ST - ZIP

500005505325--5

-05/13/02--01016--017

\*\*\*\*526.25 \*\*\*\*526.25

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

Butters Construction  
1096 E Newport Center Dr #100  
Deerfield Beach, FL 33442

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

NAME

STREET ADDRESS

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/26/02 561988-2113

STAPLE CHECK HERE

CR2E003B (12/01)