2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

2001 UNIFORM BUSINESS REPORT (UBR)									APPROVED			
DOCUMENT # A9900001218 1. Entity Name								AND FILED				
NASHVILLE INTERNATIONAL GP, LTD.								01 APR 30 AM 11: 46				
6400 NORTH ANDREWS AVENUE 6				Mailing Address 6400 NORTH ANDREWS A\ ENUE FORT LAUDERDALE FL 33:09			SECRETARY OF STATE TAULAHASSEE, FLORIDA					
2. Principal Place of Business 300 SE 2nd Street Suite, Apt. #, etc. 3. Mailing Address 300 SE 2nd S Suite, Apt. #, etc.						et		DO NOT WRITE IN THIS SPACE				
City & State Ft. Lauderdale, FL				City & State				4. FEI Number Applied For Not Applied For Not Applied For				
Zip	auderda	Country		Ft. Lauderd Zip 33301	E Le, Cour			5. Certificate	of Status Desired		Not Applicable \$8.75 Additional Fee Required	
33301	6 Name	and Address	o of Current Ro	333U1 gistered Agent	J	T		7 Name and	Address of New Re			
DUKE, BRYAN W ESQ. 6400 NORTH ANDREWS AVENUE, 5TH FLOOR FORT LAUDERDALE FL 33309						Patricia Jones Street Address (P.O. Box Number is Not Acceptable) c/o Stiles Corporation 300 SE 2nd Street City Ft. Lauderdale, FL FL Zin. Code 33301						
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 Signature typed or printed name of registered agent and title if applicable. (NOT: Registered Agent signature regulared when reinstating) OATE												
9. Capital Contributions as Shown on record. Signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent signature typed or printed name of eightered agent and title if applicable. (NOT: Registered Agent								69			TO DEPT. OF STATE	
A GENERAL PARTNER THAT IS A BUSINESS EN FITY 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.												
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	6400 NOR	386 INTERNAT	TONAL GP, IN VS AVENUE			EET ADDRESS		O SE 2nd Street Lauderdale, FL 33301				
DOCUMENT #	FURI LAU	DERDALE F	F 3330ā	<u> </u>	STRI	ET ADDRESS	rt,	. Lauderd	are, FL 33.	20.1		
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14. I hereby condicated	ertify that the	information s	supplied with thi	s filing does not qualify to at my signature shall have	the exer	mption stated	in Sec as if ma	tion 119.07(3)(i) ade under oath;	, Florida Statutes. I f that I am a General	urther certi Partner of the	fy that the information he limited partnership or	