LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

FILED

02 AUG 22 AM 10:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A99000001278

1. Entity Name
AFFINITI BUILDING, LIMITED PARTNERSHIP

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3835 NW BOCA RATON BLVD.	3835 NW BOCA RATON BLVD.
Suite, Apt. #, etc: SUITE 100-C	Suite, Apt. #, etc: SUITE 100-C
City & State: BOCA RATON FL 33431	City & State: BOCA RATON FL 33431
Zip: 33431 Country:	Zip: 33431 Country:

DUE BY MAY 1

4. FEI Number: 65-0938155 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ROSENTHAL, STUART S.

Street Address (P.O. Box Number Is Not Acceptable): 404 EAST ATLANTIC BLVD., SUITE 101

City: POMPANO BEACH FL Zip Code: 33060

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

Signature, typed or printed name of individual and the capacity or relationship to the entity.

9. Capital Contributions as Shown on record	10. Amount of Capital Contributions in FLORIDA to date	11. MAKE CHECK PAYABLE TO DEPT. OF STATE. SEE REVERSE SIDE FOR FEE INFORMATION
297,000 S.A. filed	$297000	

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 #	P99000055553
NAME	CHARRETTE ENTERPRISES, INC.
STREET ADDRESS	3835 NW BOCA RATON BLVD., SUITE 100-C
CITY-ST-ZIP	BOCA RATON, FL 33431
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

STREET ADDRESS / CITY-ST-ZIP

FF $526.25

DO NOT WRITE IN THIS SPACE

800005273548--9
-04/16/02--01011--001
****734.15 ****526.25

STAPLE CHECK HERE

CR2E003B (12/01)

13. 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: 1 pres. 4/1/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Document Number #