

2002 UNIFORM BUSINESS REPORT (UBR)

0000463 AT

DOCUMENT # A99000001434

1. Entity Name
DI LIDO BEACH COMMERCIAL, LTD.

FILED
02 SEP 27 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business: **C/O GREENBERG TRAUIG, P.A. 1221 BRICKELL AVENUE MIAMI FL 33131**

Mailing Address: **C/O GREENBERG TRAUIG, P.A. 1221 BRICKELL AVENUE MIAMI FL 33131**

2. Principal Place of Business

3. Mailing Address
1370 Av. of the Americas

Suite, Apt. #, etc.

Suite, Apt. #, etc.
29th Floor

City & State

City & State
NY, NY

DUE BY SEPTEMBER 25, 2002

4. FEI Number **65-1006066**

Applied For
 Not Applicable

Zip Country

Zip Country
10019 USA

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

6. Name and Address of Current Registered Agent

GREENBERG TRAUIG, P.A.
ATTN: JUAN P. LOUMIET, ESQ.
1221 BRICKELL AVENUE
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE DATE

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

9. Capital Contributions as Shown on record. **\$1,000.00**

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 #	P99000074998
NAME	FLAG DI LIDO RETAIL GP CORP.
STREET ADDRESS	1221 BRICKELL AVENUE
CITY-ST-ZIP	MIAMI FL 33131
DOCUMENT #	P99000076876
NAME	LIONSTONE DI LIDO RETAIL GP, INC.
STREET ADDRESS	2900 COLLINS AVENUE
CITY-ST-ZIP	MIAMI BEACH FL 33140
DOCUMENT #	M99000001315
NAME	SOBE RETAIL I, LLC
STREET ADDRESS	1271 AVENUE OF THE AMERICAS, 40TH FLOOR
CITY-ST-ZIP	NEW YORK NY 10020
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	200008152802--6 -10/02/02--01032--012
STREET ADDRESS	****541.25 ****541.25
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

CR2E003 (4/02)