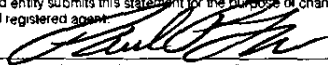


FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 APR 18 PM 2:30

**2003 LIMITED PARTNERSHIP  
UNIFORM BUSINESS REPORT (UBR)**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                             |                                                                                                                                  |                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| <b>DOCUMENT # A99000001538</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                             |                                                 |                                                        |
| 1. Entity Name<br><b>ALTIS INCOME HEDGE PARTNERSHIP, LTD.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                             |                                                                                                                                  |                                                        |
| Principal Place of Business<br>6940 TOWN HARBOUR BLVD.<br>SUITE 2411<br>BOCA RATON, FL 33433                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                             | Mailing Address<br>6940 TOWN HARBOUR BLVD.<br>SUITE 2411<br>BOCA RATON, FL 33433                                                 |                                                        |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                             | 3. Mailing Address                                                                                                               |                                                        |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                             | Suite, Apt. #, etc.                                                                                                              |                                                        |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                             | City & State                                                                                                                     |                                                        |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Country                                                                                     | Zip                                                                                                                              | Country                                                |
| 4. FEI Number<br>65-0959110                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                             | Applied For<br>Not Applicable                                                                                                    |                                                        |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                             | \$8.75 Additional<br>Fee Required                                                                                                |                                                        |
| 6. Name and Address of Current Registered Agent<br><b>LAURDO, PAUL F<br/>6940 TOWN HARBOUR BLVD.<br/>SUITE 2411<br/>BOCA RATON, FL 33433</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                             | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>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.<br>SIGNATURE:  <b>PRESIDENT, PAUL F LAURO</b> 4/9/03<br>Signature, typed or printed name of registered agent and title if applicable. DATE                                                                                                                                                                                                                                                                |                                                                                             |                                                                                                                                  |                                                        |
| 9. Capital Contributions<br>as Shown on record. <b>\$5,000,000.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                             | 10. Amount of Capital Contributions<br>in FLORIDA to date.                                                                       |                                                        |
| 11. MAKE CHECK PAYABLE TO FL DEPT OF STATE<br>SEE REVERSE SIDE FOR FEE INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                             |                                                                                                                                  |                                                        |
| A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.<br>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                             |                                                                                                                                  |                                                        |
| 12. GENERAL PARTNER INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                             | 13. ADDRESS CHANGES ONLY                                                                                                         |                                                        |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | P99000072446<br>ALTIS INCOME HEDGE, INC.<br>6940 TOWN HARBOUR BLVD.<br>BOCA RATON, FL 33433 | STREET ADDRESS<br>CITY - ST - ZIP                                                                                                | 2038 ALTA MEADOWS LANE #1503<br>DELRAY BEACH, FL 33444 |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                             | STREET ADDRESS<br>CITY - ST - ZIP                                                                                                |                                                        |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                             | STREET ADDRESS<br>CITY - ST - ZIP                                                                                                | 100016232541<br>04/18/03--01012--010 **526.25          |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                             | STREET ADDRESS<br>CITY - ST - ZIP                                                                                                |                                                        |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                             | STREET ADDRESS<br>CITY - ST - ZIP                                                                                                |                                                        |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                             | STREET ADDRESS<br>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.<br>SIGNATURE:  <b>PRESIDENT</b> 4/9/03 954-294-6427<br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER DATE Daytime Phone # |                                                                                             |                                                                                                                                  |                                                        |

STAPLE CHECK HERE

CR2E003 (10/02)