

#535.9

# LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

FILED

02 MAY -1 AM 11:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # A99000001570

1. Entity Name

MADEIRA, LTD.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1541 BRICKELL AVE

3. Mailing Address

99198 OVERSEAS HWY.

Suite, Apt. #, etc.

#407

Suite, Apt. #, etc.

#7

City &amp; State

MIAMI, FL

City &amp; State

KEY LARGO, FL

Zip

33029

Country

USA

Zip

33037

Country

USA

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number

65-0953406

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

ANN POSSCHELLE

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

4210 BRAGANZA ST.

City

COCONUT GROVE FL

Zip Code

33133

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

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

DATE

9. Capital Contributions  
as Shown on record.

819,520.00

10. Amount of Capital Contributions  
in FLORIDA to date.

819,520.00

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 # P95060042954  
NAME MRP, INC.  
STREET ADDRESS 1541 BRICKELL AVE.  
CITY-ST-ZIP MIAMI, FL 33029

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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: *Robert S. Pariente* FOR ROBERT S. PARIENTE, PRES. MRP, Inc.

CR2E003B (12/01)