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DOCUMENT # A9900001678 1. Entity Name						FILED 02 JAN 11 PM 3: 19			
SPJ INV									
	•	•					SECRETAR TALLAHASS	Y OF S	TATE
6550 NORTH SUITE 210 FT. LAUDERD	ce of Business FEDERAL HIG DALE FL 33308 Place of Busine	HWAY .	Mailing Address 6550 NORTH FEDERAL HK SUITE 210 FT. LAUDERDALE FL 33300	50 NORTH FEDERAL HIGHWAY JITE 210 . LAUDERDALE FL 33308					ORIDA
Suite Ant						Y-1000			
Suite, Apt. #, etc. Suite, Apt. #, etc.						DUE BY MAY 1, 2002			
City & Stat	te		City & State	itate		4. FEI Number	65-0950207		Applied For Not Applicable
Zip	Country		Zip	Country		5. Certificate o	f Status Desired		8.75 Additional see Required
	Name		7. Name and A	Address of New Reg	istered Ac	ent			
SINGER,	Street A	Street Address (P.O. Box Number is Not Acceptable)							
4925-A SHERIDAN STREET HOLLYWOOD FL 33021									
HOLLIW	City	FL Zip Code							
8. The above named entity submits this statement for the purpose of changing its regi					or registers				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.								DATE	
9. Capital Contributions as Shown on record. 158, 45 10. Amount of Capital Con in FLORIDA to date.					1.15	8.45	SEE REVERSE	SIDE FOR	O DEPT. OF STATE FEE INFORMATION
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE RENOTE: General Partners MAY NOT be changed on the form; an amend						ERED AND AC t must be filed	CTIVE WITH THIS to change a gen	OFFICE. eral partr	ner.
12. GENERAL PARTNER INFORMATION DOCUMENT #				13.	1		ADDRESS CHAN	GES ONLY	
NAME STREET ADDRESS	SULLIVAN, MICHAEL D 6550 NORTH FEDERAL HIGHWA FT. LAUDERDALE FL 33308		1	STREET ADDRESS				····	~ * -
CITY-ST-ZIP				CITY-ST-ZIP			nnod 7.	* = * = *	
DOCUMENT # NAME	JACOB, S1			STREET ADDRESS	094-4		-01/15/02 -01/15/02	0100	03025
STREET ADDRESS CITY-ST-ZIP	6550 NORTH FEDERAL HIGHWA FT. LAUDERDALE FL 33308		<u>, </u>	CITY-ST-ZIP					***526.25
00CUMENT # NAME	POWELL, 0			STREET ADDRESS_		-	· · ·	FB	5ab. 25
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thereby 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:

CR2E003 (9/01)