

2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0006383 AF

DOCUMENT # A99000001912

1. Entity Name

INTERNATIONAL PLACE II, LTD.

01 APR 30 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
6400 NORTH ANDREWS AVENUE
FORT LAUDERDALE FL 33309

Mailing Address
6400 NORTH ANDREWS A/VENUE
FORT LAUDERDALE FL 33309



2. Principal Place of Business
300 SE 2nd Street
Suite, Apt. #, etc.

3. Mailing Address
300 SE 2nd Street
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Ft. Lauderdale, FL

City & State
Ft. Lauderdale, FL

4. FEI Number 65-0966845

Applied For
Not Applicable

Zip 33301 Country

Zip 33301 Country

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

6. Name and Address of Current Registered Agent

DUKE, BRYAN W ESQ.
6400 NORTH ANDREWS AVENUE
FORT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name
Patricia Jones
Street Address (P.O. Box Number is Not Acceptable)
c/o Stiles Corporation
300 SE 2nd Street
City Ft. Lauderdale, FL FL Zip Code 33301

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

(NOT Registered Agent signature required when reinstating)

DATE 2/21/01

9. Capital Contributions as Shown on record. \$3,000,000.00

10. Amount of Capital Contributions in FLORIDA to date \$2,955,397.00

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 # P99000100836
NAME INTERNATIONAL PLACE II, INC.
STREET ADDRESS 6400 NORTH ANDREWS AVENUE
CITY-ST-ZIP FORT LAUDERDALE FL 33309

13. ADDRESS CHANGES ONLY

STREET ADDRESS 300 SE 2nd Street
CITY-ST-ZIP Ft. Lauderdale, FL 33301

DOCUMENT #
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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:

Patricia Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Patricia Jones

2/21/01
Date

954/627-9300
Daytime Phone #

CR2E003 (11/00)