

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2000 8:00 am
Secretary of State

DOCUMENT # A99000001967
 1. Entity Name
THREE J.L., LTD.

Principal Place of Business: **9400 SOUTH DADELAND BLVD., SUITE 600 MIAMI FL 33156**
 Mailing Address: **9400 SOUTH DADELAND BLVD., SUITE 600 MIAMI FL 33156-2841**



2. Principal Place of Business: **3640 SW 185th Avenue**
 Suite, Apt. #, etc.

3. Mailing Address: **3640 SW 185th Avenue**
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State: **Miramar, FL**

City & State: **Miramar, FL**

Zip: **33029** Country: **USA**

4. FEI Number Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

SILVERMAN, STEVEN
9400 SOUTH DADELAND BLVD., SUITE 600
MIAMI FL 33156

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.

SIGNATURE: *[Signature]*
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: _____

9. Capital Contributions as Shown on record: **\$210,000.00**

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 #	P99000102488
NAME	THREE J.L., INC.
STREET ADDRESS	9400 SOUTH DADELAND BLVD., SUITE 600
CITY - ST - ZIP	MIAMI FL 33156
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	3640 SW 185th Avenue
CITY - ST - ZIP	Miramar, FL 33029
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	900003284059--8
CITY - ST - ZIP	-06/12/00--01007--019
STREET ADDRESS	***526.25 ***526.25
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]* **4-26-00** 305-885-1429
 Signature and typed or printed name of signing general partner Date Daytime Phone #

Linda Hoetwell

11/16/00 3:00:24C