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APPROVEL PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS EORM. 03 JAH - 3 PH 2: 26 SECRETARY OF STAFE TÄLLAHASSEE, FLORIDA DOCUMENT # B0000000011 Equity Industrial Limited Partnership IV 3. Mailing Office Address 2. Principal Office Address 4. Date Formed or Registered To Do Business in Florida 0 1/20/2000 145 Rosemany 145 Roseman Applied For 5. FEI Number Not Applicable \$8.75 Additional Fee required City & State CERTIFICATE OF STATUS DESIRED for a Certificate of Status Needham MA 7a. Capital Contributions as shown on Record: Country Country 147,500.00 USA 7b. Amount of Capital Contributions in FLORIDA to date: 8. Name and Address of Current Registered Agent FEES: Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for <u>each year due</u> this office. Compan <u>Ordoration</u> Street Address (P.O. Box Number is Not Acceptable) 1201 Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year. Suite, Apt. #, Etc. 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate Zip Code State and appropriate filing fee. llahassee FI 12301-252 Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. Cynthia L. Harris Cherris as its agent DATE 8 SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE Registration Document Number Address of Each General Partner (Do NOT Use Post Office Box Numbers) City, State and Zip Code 10. Name(s) of General Partner(s) 145 Roseman street, F0000000358 Nechamim 02494 Industrial II, Inc. Equity \$7,052.50 200009856952 01/06/03-01008+003 **3102.50 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under cath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620 florida Statutes. SIGNATURES Neal Shalom Typed or Printed Name of General Partner Signing Form