200	2 UNIFOR	M BUSI	NESS REPO	RT (UB	R)	i	APPROVE	ž	
DOCU	7.		,	AND FILED					
PIRANHA CAPITAL, L.P.				y ^{see}		02 MAY 28 PM 3: 33			
Principal Pla	ice of Business		Mailing Address		-] 	SECRETARY OF ALLAHASSEE,	STATE FLORID	A
417 12TH STREET WEST. STE. 213 417 12TH STREET WEST. STEADENTON FL 34205 BRADENTON FL 34205				STE. 213		, ,	11200		
2. Principal Place of Business Street W. 3. Mailing Address 417 1245 Street W. 417 1245 3					<u>W.</u>	1158118) IDII 00111 00111 00111 0011 0		FRIOR CHOLDING BILLION
Suite, Apt. #, etc.				•	DUE BY MAY 1, 2002				
	adenton	FL	City & State		<u> </u>	4. FEI Numbe	65-1058925		Applied For Not Applicable
3	4205 Countr	USA	34205	Country	•			ٺ Fe	3.75 Additional Required
6. Name and Address of Current Registered Agent Name Name							Address of New Regi		
Robert 417 12Th	Street A	Street Address (P.O. Box Number is Not Acceptable)							
BRADENTON FL 34205									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
City								FL	Zip Code
8. The above named entity submits this statement to the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printy in the of registered sent and title if applicable.								02	
9. Capital Contributions as Shown on record. \$250,000.00 40. 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 A NOTE: General Partners MAY NOT be changed on the form; an amendment must							CTIVE WITH THIS (OFFICE.)r.
12.		NERAL PARTNER II		13.	т		ADDRESS CHANG		
DOCUMENT # NAME STREET ADDRESS	LONGBOAT GLOB	DNGBOAT GLOBAL ADVISORS, L.L.(17 12TH STREET WEST, STE. 213		STREET ADDRESS					
CITY-ST-ZIP	BRADENTON FL 3			CITY-ST-ZIP					
DOCUMENT / NAME STREET ADDRESS				STREET ADDRESS		80	000056 -06/04/0	777	784
CITY-ST-ZIP		···		CITY-ST-ZIP			****437.	2010 .50 *:	***437.50
NAME	ه د د د د د د د د د د د د	- ماسي	er with the second	STREET ADDRESS -		-	•		
STREET ADDRESS CITY-ST-ZIP				CITY-ST-ZIP		B C	1000561	777	Z34
NAME			:	STREET ADDRESS			-06/04/02 -06/04/02 -*****88.	2010 .75 **	57002 ****88,75
STREET ADDRESS									
CITY-ST-ZIE	****			CITY-ST-ZIP					
DOCUMENT NAME		-		CITY-ST-ZIP STREET ADDRESS					
DOCUMENT NAME STREET ADDRESS CITY-ST-ZIP			:						
DOCUMENT NAME STREET ADDRESS				STREET ADDRESS					

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 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER