


**2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

FILED
03 MAY -2 PM 7:50
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

DOCUMENT # B0100000224

1. Entity Name
AFG SERVICES, L.P.



Principal Place of Business 2808 FAIRMOUNT, SUITE 250, LB-9 DALLAS, TX 75201	Mailing Address 2808 FAIRMOUNT, SUITE 250, LB-9 DALLAS, TX 75201
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DUE BY MAY 1, 2003

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$3,000,000.00	10. Amount of Capital Contributions in FLORIDA to date. 3,000,000.00	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	MO1000001438 AFG SERVICES GP, LLC 2808 FAIRMOUNT, SUITE 250, LB-9 DALLAS, TX 75201	STREET ADDRESS CITY-ST-ZIP	600017910496 05/02/03--01099--003 **526.25
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STAPLE CHECK HERE

CRZE003 (10/02)

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: *Pattie Heath* *Pattie Heath* **4/30/03** **214-303-1653**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #