FILED

03 AUG -1 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B01000000263

1. Entity Name
PREMIER PALM BEACH, L.P.

800021989118
08/01/03--01039--002 **926.25

Principal Place of Business	Mailing Address
3201 W. GRIFFIN ROAD SUITE 106 DANIA BEACH, FL 33312	3201 W. GRIFFIN ROAD SUITE 106 DANIA BEACH, FL 33312
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-1122498 — [ ] Applied For [X] Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DECKELBAUM, GORDON R
3201 W. GRIFFIN RD. #106
DANIA BEACH, FL 33312

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

9. Capital Contributions as Shown on record. $4,000,000.00

10. Amount of Capital Contributions in FLORIDA to date. 4,000,000

MAKE CHECK PAYABLE TO: DEPARTMENT 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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L00000004128	STREET ADDRESS	
NAME	PREMIER DEVELOPERS II, L.L.C.		
STREET ADDRESS	3201 W. GRIFFIN ROAD		
CITY-ST-ZIP	DANIA BEACH, FL 33312	CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E033 (10/02)

STAPLE CHECK HERE

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: Gordon Deckelbaum — 7/25/03 — 954-965-3636

Signature and typed or printed name of signing general partner — Date — Daytime Phone #