

# LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

02 MAY 28 PM 3:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # B01000000424

1. Entity Name

TRAILS-HARRIS STREET, LTD.

**DO NOT WRITE IN THIS SPACE**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1640 S. Sepulveda #308

3. Mailing Address

Post Office Box 25991

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Los Angeles, CA 90025

Los Angeles, CA 90025

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1

4. FEI Number

86-0694-252

Applied For

Not-Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301

**DO NOT WRITE  
IN THIS SPACE**

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

DATE

9. Capital Contributions

as Shown on record.

5,000

10. Amount of Capital Contributions

in FLORIDA to date.

5,000

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 # F01000006341  
NAME Pacific Equities Group, Inc.  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

1640 S. Sepulveda Blvd., #308

CITY-ST-ZIP

Los Angeles, CA 90025

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

000005677910--1

-06/04/02--01071--007

CITY-ST-ZIP

\*\*\*\*\*88.75 \*\*\*\*\*88.75

DOCUMENT #  
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STREET ADDRESS  
CITY-ST-ZIP

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\*\*\*\*\*52.50 \*\*\*\*\*52.50

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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:

Harvey Rosen, Sec.  
of General Partner

4-24-02

310  
477.5300

CR2E003B (12/01)