

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # B94000000245**

1. Entity Name

**DARK STARR LIMITED PARTNERSHIP**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

FEB 24 AM 10:45

Principal Place of Business

2601 S. BAYSHORE DR. STE. 300-A  
MIAMI FL 33133

Mailing Address

ONE GREENWAY PLAZA  
SUITE 850  
HOUSTON TX 77046-0196



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0500559

Applied For

Not Applicable

Zip

Country

Zip

Country

33133-5413

USA

USA

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**COBER CORPORATE AGENTS, INC.**  
2601 S. BAYSHORE DRIVE, 19TH FLOOR  
MIAMI FL 33133

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

**\$7,750,000.00**

10. 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 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 # **A94000000846**  
NAME **LEF/KENDALL MALL, LTD.**  
STREET ADDRESS **848 BRICKELL AVE., STE. 1120**  
CITY - ST - ZIP **MIAMI FL 33131**

STREET ADDRESS **2601 South Bayshore Drive, Suite 300-A**  
CITY - ST - ZIP **Miami, Florida 33133-5413**

DOCUMENT #  
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*W/ 3/6/00*

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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 **LEF/Kendall Mall, Inc., General Partner of LEF/Kendall Mall, Ltd., General Partner of Dark Starr Limited Partnership**

SIGNATURE:

*Sandra E. Ray*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

January 18, 2000

Date

713-850-1850

Daytime Phone #

CR2E003 19/99