

2001 UNIFORM BUSINESS REPORT (UBR)

0017165 AF

DOCUMENT # B94000000245

1. Entity Name

DARK STARR LIMITED PARTNERSHIP

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 2601 S. BAYSHORE DR. STE. 300-A MIAMI FL 33133-5413	Mailing Address ONE GREENWAY PLAZA SUITE 850 HOUSTON TX 77046-0102
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 65-0500559	Applied For Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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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: David A. Friedman
Street Address (P.O. Box Number is Not Acceptable):
2601 S. Bayshore Drive Ste 300-A
City: Miami, State: **FL**, Zip Code: 33133

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: *David A. Friedman* DATE: 3-26-2001
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **\$7,750,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **Same**

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 #	A94000000846
NAME	LEF/KENDALL MALL, LTD.
STREET ADDRESS	2601 SOUTH BAYSHORE DRIVE, SUITE 300-A
CITY-ST-ZIP	MIAMI FL 33133-5413
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
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CITY-ST-ZIP	
DOCUMENT #	
NAME	
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CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
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****535.00 ****535.00

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 Star Limited Partnership**

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

March 20, 2001 713-850-1850
Date Daytime Phone #

CR2E003 (11/00)