

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0018401 AB

DOCUMENT # B97000000670

1. Entity Name
JAN REAL ESTATE COMPANY LIMITED PARTNERSHIP



FILED

03 JAN 21 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
PGA BLVD. & MILITARY TRAIL
PALM BEACH GARDENS FL 33418

Mailing Address
C/O HERBERT GOLDSTEIN CPA
37000 GRAND RIVER. STE. 80
FARMINGTON HILLS MI 48335

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2003

4. FEI Number 38-3383502

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GYONGYOSI, EVA
TWO OCEAN LANE
MANALAPAN FL 33462

Name

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

500010387985

01/21/03--01059--007 **535.00

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. \$13,000,000.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 # F97000006551
NAME EVGA CORPORATION
STREET ADDRESS 25900 ROMANY WAY
CITY-ST-ZIP FRANKLIN MI 48025

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

M THOMAS

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: / SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

EVGA CORPORATION
PRESIDENT EVA GYONGYOSI

Date Daytime Phone #

CR2E003 (10/02)