## **2002 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # B9800000131  1. Entity Name PLAZA DEL MAR, LP.						SECRETARY OF DIVISION OF CORP	STATE ORATION	> \ ( / )	0010949 AT
						DIVISION OF COM	2:54	•	
Principal Place of Business 1500 N. FEDERAL HWY #202 FORT LAUDERDALE FL 33304			Mailing Address 1500 N. FEDERAL HWY #202 FORT LAUDERDALE FL 33304		,		OZ MAY - 2 PH 2: 54		
2. Principal P	lace of Busin	ess	3. Mailing Address						
Suite, Apt. #, etc. City & State			Suite, Apt. #, etc.  City & State			DUE BY MAY 1, 2002			7
						4. FEI Number 65-0812830 Applied For Not Applicable			
Zip	1	Country	Zip	Coun	ntry	5. Certificate of Status Desired		8.75 Additional	_
	6. Name	and Address of Current	Registered Agent	-	Manife	7. Name and Address of New Re		<u> </u>	<u> </u>
COOK, RICHARD E					Name				
1500 N. FEDERAL HWY, STE 202					Street Address	s (P.O. Box Number is Not Acceptable)			_
FORT LA	UDERDALE	FL 33304						<b>,</b>	
					O14			Zip Code	
					City		FL	Zib Code	
8. The above	named entity	submits this statement fo	or the purpose of changing	j its register		ered agent, or both, in the State of Flori		Zip code	
	·			j its registeri		ered agent, or both, in the State of Flori	ida.	Zip code	
SIGNATURE .	Signature, typed o	or printed name of registered agent	and title if applicable.		red office or regist		DATE		
SIGNATURE .	Signature, typed on tributions on record.	sr printed name of registered agent \$7,290,000.00	and title if applicable.  10. Amount of Ca	apital Contril	ed office or regist	11. MAKE CHECK SEE REVERSI	DATE  ( PAYABLE 1 E SIDE FOR	TO DEPT. OF STATE	
SIGNATURE _ 9. Capital Co	Signature, typed on ntributions on record.	\$7,290,000.00 ENERAL PARTNER 1	and title if applicable.  10. Amount of Ca in FLORIDA t	apital Contril to date.	ed office or regist butions	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr	TO DEPT. OF STATE FEE INFORMATION	
9. Capital Co as Shown o	Signature, typed of intributions on record.  A G NOTE:	\$7,290,000.00  ENERAL PARTNER T General Partners MA GENERAL PARTNER	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril to date.	ed office or regist butions IUST BE REGIS	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr	TO DEPT. OF STATE FEE INFORMATION	£
9. Capital Co as Shown of	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE	\$7,290,000.00  ENERAL PARTNER T General Partners MA GENERAL PARTNEI 0288 IL MAR MANALAPAN	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril o date.  ENTITY M n the form	ed office or regist butions IUST BE REGIS	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr	TO DEPT. OF STATE FEE INFORMATION	3 (9/01)
StGNATURE _ 9. Capital Co	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER 1 General Partners MA GENERAL PARTNEI 0288	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril o date.  ENTITY M n the form 13.	butions  Second	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr	TO DEPT. OF STATE FEE INFORMATION	_ ~
9. Capital Co as Shown of 12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER TO GENERAL PARTNER MA GENERAL PARTNER TO GENERAL PARTNER TO 10288  IL MAR MANALAPAN EDERAL HWY #202	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril to date.  ENTITY M n the form 13.  STRE	butions  TUST BE REGIS  THE ADDRESS	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a gen ADDRESS CHAN	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. NGES ONLY	TO DEPT. OF STATE FEE INFORMATION ner.	CR2E003 (9/01)
9. Capital Co as Shown of 12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER TO GENERAL PARTNER MA GENERAL PARTNER TO GENERAL PARTNER TO 10288  IL MAR MANALAPAN EDERAL HWY #202	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril to date.  ENTITY M n the form  13.  STRE	butions  BUST BE REGIS  1; an amendment	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger ADDRESS CHAN	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr NGES ONLY	TO DEPT. OF STATE FEE INFORMATION ner.	_ ~
9. Capital Co as Shown of 12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER TO GENERAL PARTNER MA GENERAL PARTNER TO GENERAL PARTNER TO 10288  IL MAR MANALAPAN EDERAL HWY #202	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril to date.  ENTITY M n the form  13.  STRE  CITY  STRE	butions  BUST BE REGIS  THE TADDRESS  TO STO ZIP  EET ADDRESS	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger ADDRESS CHAN	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr NGES ONLY	TO DEPT. OF STATE FEE INFORMATION Her.  199-1	_ ~
9. Capital Coas Shown of Shown	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER TO GENERAL PARTNER MA GENERAL PARTNER TO GENERAL PARTNER TO 10288  IL MAR MANALAPAN EDERAL HWY #202	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril to date.  ENTITY M n the form  13.  STRE  CITY  STRE	butions  BUST BE REGIS  THE ADDRESS  TO ST-ZIP  TO ST-ZIP	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger ADDRESS CHAN  11. MAKE CHECK SEE REVERSI	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr NGES ONLY	TO DEPT. OF STATE FEE INFORMATION Her.  199-1	_ ~
9. Capital Coas Shown of as Sh	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER TO GENERAL PARTNER MA GENERAL PARTNER TO GENERAL PARTNER TO 10288  IL MAR MANALAPAN EDERAL HWY #202	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril o date.  ENTITY M n the form  13.  STRE  CITY  STRE  CITY	butions  NUST BE REGIS  THE TANDRESS  TO STO JUPE  THE TANDRESS  THE TANDR	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger ADDRESS CHAN  11. MAKE CHECK SEE REVERSI	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr NGES ONLY	TO DEPT. OF STATE FEE INFORMATION Her.  199-1	_ ~
9. Capital Coas Shown of as Street Address City-St-Zip Document # NAME STREET ADDRESS CITY-St-Zip Document # NAME STREET ADDRESS CITY-St-Zip Document # NAME STREET ADDRESS STREET ADDRESS	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER TO GENERAL PARTNER MA GENERAL PARTNER TO GENERAL PARTNER TO 10288  IL MAR MANALAPAN EDERAL HWY #202	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril to date.  ENTITY M n the form  13.  STRE  CITY  STRE  CITY  STRE	butions  TUST BE REGIS  TO ST-ZIP  EET ADDRESS  TO ST-ZIP  EET ADDRESS  TO ST-ZIP  EET ADDRESS  TO ST-ZIP	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger ADDRESS CHAN  11. MAKE CHECK SEE REVERSI	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr NGES ONLY	TO DEPT. OF STATE FEE INFORMATION Her.  199-1	_ ~
9. Capital Co as Shown of  12.  DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DOCUMENT # NAME	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER TO GENERAL PARTNER MA GENERAL PARTNER TO GENERAL PARTNER TO 10288  IL MAR MANALAPAN EDERAL HWY #202	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril to date.  ENTITY M n the form  13.  STRE  CITY  STRE  CITY  STRE  CITY	butions  HUST BE REGIS  THE TADDRESS  TO STO ZIP  EET ADDRESS	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger ADDRESS CHAN  11. MAKE CHECK SEE REVERSI	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr NGES ONLY	TO DEPT. OF STATE FEE INFORMATION Her.  199-1	_ ~
9. Capital Co as Shown of 12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER TO GENERAL PARTNER MA GENERAL PARTNER TO GENERAL PARTNER TO 10288  IL MAR MANALAPAN EDERAL HWY #202	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril to date.  ENTITY M n the form  13.  STRE  CITY  STRE  CITY  STRE  CITY  STRE  CITY  STRE	butions  HUST BE REGIS  1; an amendment  EET ADDRESS  7-ST-ZIP  EET ADDRESS  7-ST-ZIP  EET ADDRESS  7-ST-ZIP  EET ADDRESS	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger ADDRESS CHAN  11. MAKE CHECK SEE REVERSI	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr NGES ONLY	TO DEPT. OF STATE FEE INFORMATION Her.  199-1	_ ~
9. Capital Coas Shown of as Sh	Signature, typed of ntributions on record.  A G NOTE:  GP980000 PLAZA DE 1500 N. F	\$7,290,000.00  ENERAL PARTNER TO GENERAL PARTNER MA GENERAL PARTNER TO GENERAL PARTNER TO 10288  IL MAR MANALAPAN EDERAL HWY #202	and title if applicable.  10. Amount of Cain FLORIDA t THAT IS A BUSINESS LY NOT be changed o	apital Contril o date.  ENTITY M n the form  13.  STRE  CITY  STRE  CITY  STRE  CITY  STRE  CITY  CITY  CITY	butions  BUST BE REGIS  THE STANDRESS  TO STO ZIP  EET ADDRESS	11. MAKE CHECK SEE REVERSI STERED AND ACTIVE WITH THIS ent must be filed to change a ger ADDRESS CHAN  11. MAKE CHECK SEE REVERSI	DATE  ( PAYABLE 1 E SIDE FOR S OFFICE. neral partr NGES ONLY	TO DEPT. OF STATE FEE INFORMATION Her.  199-1	_ ~

**SIGNATURE:** 

4-26-02 954-567-9358

Date Dayline Phone #