

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B99000000440	
1. Entity Name LUPO M.G., L.P.	
Principal Place of Business 190 Glades Road, Suite C Boca Raton, Florida 33431	Mailing Address 190 Glades Road, Suite C Boca Raton, Florida 33432

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

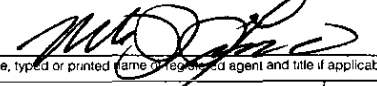
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0831302	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent Lloyd Granet 1900 N.W. Corporate Boulevard Suite 100, West Building Boca Raton, Florida 33431	7. Name and Address of New Registered Agent Name: Vito J. Lupo Street Address (P.O. Box Number is Not Acceptable) 190 Glades Road, Suite C City: Boca Raton FL Zip Code: 33432
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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)	4/21/00 DATE
9. Capital Contributions as Shown on record. 0	10. Amount of Capital Contributions in FLORIDA to date. 0	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 # F99000000440	NAME Lupo Texas, Inc.	STREET ADDRESS	
STREET ADDRESS 190 Glades Road, Suite C	CITY-ST-ZIP Boca Raton, FL 33432	CITY-ST-ZIP	200003298092--0
DOCUMENT #	NAME	STREET ADDRESS	06/21/00 01004-002
STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	***141.25 ***141.25
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DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	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)(l), 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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Vito J. Lupo	4/21/00	(561) 395-7410
	Date	Daytime Phone #	

CR2E003 (9/99)