

FILED
Jun 03, 2002 8:00 am
Secretary of State

05-12-2002 90579 013 ****50.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000010639

1. Entity Name
UIRT LP, L.L.C.

Principal Place of Business
**5847 SAN FELIPE SUITE 850
HOUSTON TX 77057-3008**

Mailing Address
**5847 SAN FELIPE SUITE 850
HOUSTON TX 77057-3008**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1696 NE MIAMI GARDENS DR.
Suite, Apt. #, etc.

3. Mailing Address
1696 NE MIAMI GARDENS DR.
Suite, Apt. #, etc.

City & State
NORTH MIAMI BEACH, FL
Zip
33179
Country

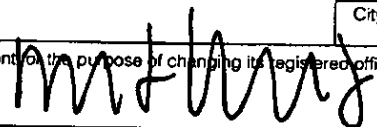
City & State
NORTH MIAMI BEACH, FL
Zip
33179
Country

4. FEI Number
X 76-0693532
Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent
**CORPODIRECT AGENTS
103 N. MERIDIAN ST.
LOWER LEVEL
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent
Name
MARCUS, ALAN J
Street Address (P.O. Box Number is Not Acceptable)
20808 BISCAYNE BLVD
SUITE # 301
City
AVENTURA **FL** Zip Code
33180

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  **4/22/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

OK

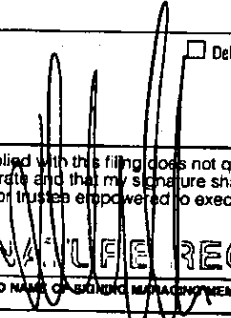
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
P/S/D KATZMAN, CHAIM 1696 NE MIAMI GARDENS DRIVE NORTH MIAMI BEACH, FL 33179	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
VPT/D VALEO, DORON 1696 NE MIAMI GARDENS DRIVE NORTH MIAMI BEACH, FL 33179	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
P/S/D KATZMAN, CHAIM 1696 NE MIAMI GARDENS DRIVE NORTH MIAMI BEACH, FL 33179	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
VPT/D VALEO, DORON 1696 NE MIAMI GARDENS DRIVE NORTH MIAMI BEACH, FL 33179	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **SIGNATURE REQUIRED** **4/22/02** **305 947-1644**
Signature and typed or printed name of signing managing member, manager, or authorized representative Date Daytime Phone #

CR2E083 (9/01)