

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000056596

Entity Name: UETA PARTNERS, INC.

FILED
Apr 30, 2003
Secretary of State

Current Principal Place of Business:

19495 BISCAYNE BOULEVARD
SUITE 300
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

19495 BISCAYNE BOULEVARD
SUITE 300
AVENTURA, FL 33180

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TANEY, DAVID J
19495 BISCAYNE BOULEVARD
SUITE 300
AVENTURA, FL 33180

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: FALIC, SIMON
Address: 19495 BISCAYNE BOULEVARD, SUITE 300
City-St-Zip: AVENTURA, FL 33180

Title: V (X) Delete
Name: FALIC, JEROME
Address: 19495 BISCAYNE BOULEVARD, SUITE 300
City-St-Zip: AVENTURA, FL 33180

Title: V (X) Delete
Name: FALIC, LEON
Address: 19495 BISCAYNE BOULEVARD, SUITE 300
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change () Addition
Name: FALIC, LEON
Address: 19495 BISCAYNE BOULEVARD, SUITE 300
City-St-Zip: AVENTURA, FL 33180

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEON FALIC

DPTS

04/30/2003

Electronic Signature of Signing Officer or Director

Date