

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State
 05-07-2002 90271 042 ***150.00

CR1020
 AV

DOCUMENT # P99000095466

1. Entity Name
EASTWOOD MANAGEMENT, INC.

Principal Place of Business Mailing Address

2665 S. BAYSHORE DR., STE. 703 **2665 S. BAYSHORE DR., STE. 703**
MIAMI FL 33133 **MIAMI FL 33133**



2. Principal Place of Business 3. Mailing Address

11714 SW 135 PLACE **11714 SW 135 PLACE**

Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State

MIAMI FL **MIAMI FL**

Zip Country Zip Country

33186 USA **33186 USA**

4. FEI Number Applied For

65-0957948 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WORLD CORPORATE SERVICES, INC.
2665 S. BAYSHORE DR., STE. 703
MIAMI FL 33133

7. Name and Address of New Registered Agent

Name **DEBORAH S. YATES**
EASTWOOD MANAGEMENT INC

Street Address (P.O. Box Number is Not Acceptable)
11714 SW 135 PLACE

City State Zip Code

MIAMI FL 33186

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 *Deborah S Yates, President* DATE **4-22-02**

DEBORAH S. YATES. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	YATES, GEORGE A	
STREET ADDRESS	2665 S BAYSHORE DRIVE SUITE 703	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	PS	<input type="checkbox"/> Delete
NAME	YATES, DEBORAH S	
STREET ADDRESS	2665 S BAYSHORE DRIVE SUITE 703	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	VP	<input type="checkbox"/> Delete
NAME	YATES, GEORGE E	
STREET ADDRESS	2665 S BAYSHORE DRIVE SUITE 703	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Deborah S Yates (DEBORAH S. YATES)* DATE: **4-22-02** DAYTIME PHONE #: **305 385.3931**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)