UN	IFOR	M BUS	INES	REPOR	T (	JBR)								
DOCUMENT # A0200000836  1. Entity Name H WESTON REALTY, LTD.								FILED 2003 MAY 14 PM 3: :0						
Principal Place of Business 450 EAST LAS OLAS BLVD. SUITE 1500 FT. LAUDERDALE FL 33301				illing Address ) EAST LAS OLAS BLV ITE 1500 LAUDERDALE FL 333(			1 ( <b>188</b> 1 <b>6</b> 1)		HASSEE	, FLC	ORIDA			
2. Principal Place of Business				3. Mailing Address										
· Suite, Apt. #, etc.				Suite, Apt. #, etc.					DUE, E	Y MAY 1,	2003	<del></del>	·	
City & State				City & State		4. Fi						olied For Applicable		
Zip Country			Ž	Zip	Coun	try	5. Certificate of Status Desired					. <b>75</b> Addi	itional	
	6. Name			7. N	ame and	Address of Ne	w Registere	d Age	nt					
AMEDICA.	N INCODE		Name											
AMERICAN INFORMATION SERVICES, INC. ONE SOUTHEAST THIRD AVE.						Street Address (P.O. Box Number is Not Acceptable)								
SUITE 2800						05/14/030106201						ī41.29	5	
MIAM! FL 33131						City FL Zip Code								
the obliga	e named entit tions of regist		ment for the p	urpose of changing its	s registere	Led office or regi	istered age	nt, or both	n, in the State o	Florida. I ai	m famil	iar with, a	and accept	
SIGNATURE	Signature, typed	or printed name of registe	red agent and title if	applicable,						DATE	:		<del></del>	
9. Capital Co as Shown		tal Contrit date.	outions	0.00	)	11. MAKE C	IECK PAYABI ERSE SIDE I							
12.		: General Partn	ers MAY NO	S A BUSINESS EN T be changed on t					i to change a		artne	r		
DOCUMENT #	1100000000					<del></del>			ADDITESS	CHANGESC	MEI			
VAME HUIZENĞA HOLDINGS, INC. STREET ADDRESS 450 EAST LAS OLAS BLVD.				·		ET ADORESS								
CITY-ST-ZIP DOCUMENT #	<del></del>					<del></del>	<del></del>							
name Street address	ME					ET ADORESS				. <u> </u>				
CITY-ST-ZIP					CITY								·	
DOCUMENT # NAME					STRE	STREET ADDRESS								
STREET ADDRESS CITY-ST-ZIP	P				CITY	City-st-zip						_		
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STREET ADDRESS CITY-ST-ZIP					CITY	-ST-ZIP		<u>.</u>						
DOCUMENT <b>#</b> NAME					STRE	et address								
STREET ADDRESS CITY-ST-ZIP				•	CITY-	-ST-ZIP				<del></del>				

14. 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 angraccurate 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

CRYS V BRAYMV VILL

SIGNATURE:

4-28-03

954-627-5000

SIGNATURE: