


2002 UNIFORM BUSINESS REPORT (UBR)

0010008 AT

DOCUMENT # A24869

1. Entity Name
WEST DADE, LTD.

FILED
02 APR 24 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**401 MIRACLE MILE
SUITE 302
CORAL GABLES FL 33134**

Mailing Address
**PO BOX 440584
MIAMI FL 33144**

2. Principal Place of Business
7860 N.W. 71 ST.

3. Mailing Address
P.O. BOX 440584

Suite, Apt. #, etc.
MIAMI, FLA.

City & State
MIAMI, FLA.

Zip
33144 Country
U.S.A.

DUE BY MAY 1, 2002

4. FEI Number
59-2824499

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**MARTINEZ, ABISTIDES
7860 N.W. 71 ST.
MIAMI FL 33166**

7. Name and Address of New Registered Agent

Name
ROLANDO BARRERO

Street Address (P.O. Box Number is Not Acceptable)
7860 N.W. 71 ST.

City
MIAMI FL Zip Code
33166

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 *Rolando Barrero* DATE 4/18/02
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$1,550,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

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	
DOCUMENT #	M55130
NAME	ROMAT, INC.
STREET ADDRESS	7860 NW 71 ST
CITY-ST-ZIP	MIAMI FL 33166
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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)(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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Rolando Barrero* DATE 4/18/02 DAYTIME PHONE # (305) 592-5311
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CR2E003 (9/01)