

2000 UNIFORM BUSINESS REPORT (UBR)

0006261 AF

DOCUMENT # A96000002278

1. Entity Name

EAST OCEAN DEVELOPERS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 24 AM 3:05



DO NOT WRITE IN THIS SPACE

Principal Place of Business

3400 NE 34 ST., #101
FORT LAUDERDALE FL 33308

Mailing Address

3400 NE 34 ST., #101
FORT LAUDERDALE FL 33308-6908

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0714977

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC.
777 SOUTH FLAGLER DRIVE, SUITE 500 EAST
WEST PALM BEACH FL 33401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$4,832,500.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # GP9600000743
NAME BRWD, A FLORIDA GENERAL PARTNERSHIP
STREET ADDRESS 3400 NE 34 ST., #101
CITY - ST - ZIP FORT LAUDERDALE FL 33308

STREET ADDRESS

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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:

BRWD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

HOWARD WOLOFSKY, AUTH SIGNATORY

4/10/00

Date

(954) 568-4118

Daytime Phone #