2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000000418

Entity Name

W/B MERRITT SQUARE LTD

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 AUG 14 AM 10:02
00067173

Principal Place of Business
2665 SOUTH BAYSHORE DRIVE, SUITE 1002
MIAMI FL 33133

Mailing Address
2665 SOUTH BAYSHORE DRIVE, SUITE 1002
MIAMI FL 33133-5462

DO NOT WRITE IN THIS SPACE

Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0905377 ☐ Applied For ☐ Not Applicable

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
W/B MERRITT SQUARE CORP. 2665 SOUTH BAYSHORE DR., #1002 MIAMI, FLORIDA 33133	Name Street Address (P.O. Box Number is Not Acceptable) 000003370308--5 -08/23/00--01110--004 City ****526.25

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 _____ DATE
Signature, typed or printed name, and title if applicable. (NOTE: Registered Agent signature required when changing)

Capital Contributions as Shown on record. 400,000	10. Amount of Capital Contributions in FLORIDA to date. 100,000	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.

GENERAL PARTNER INFORMATION	13. ADDRESS CHANGES ONLY
P99000020465 W/B MERRITT SQUARE CORP. 2665 SOUTH BAYSHORE DR.,#1002 MIAMI, FLORIDA 33133	STREET ADDRESS CITY - ST - ZIP
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CR2E003 (9/98)

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: _____ WARREN WEISER 4/26/00 305(858-7342)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #