

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000003115

1. Entity Name

WEST TROPICAL INVESTMENTS CORP.

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**

05-17-2000 90983 023 \*\*\*158.75

Principal Place of Business

Mailing Address

4950 W PROSPECT RD  
FT LAUDERDALE FL 33309  
US

4950 W PROSPECT RD  
SUITE 230  
FT LAUDERDALE FL 33309-3050  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

see attached LTR 147C

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

ADELSTEIN, STEVEN  
624 WEST TROPICAL WAY  
PLANTATION FL 33317

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. 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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME ADELSTEIN, STEVEN  
STREET ADDRESS 4950 W PROSPECT RD  
CITY-ST-ZIP FT LAUDERDALE FL 33309

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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:

*Steven Adelstein*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven Adelstein

4/25/00

Date

954-745-0077

Daytime Phone #

CR2E034 (9/99)



Department of the Treasury  
Internal Revenue Service

ATLANTA, GA 39901

Attachment  
# F 9400000 3115-

955299

In reply refer to: 0716921482  
Jan. 12, 2000 LTR 147C  
04-3095600 000000 00 000  
00489

WEST TROPICAL INVESTMENTS CORP  
4950 W PROSPECT RD  
FT LAUDERDALE FL 33309

Employer Identification Number: 04-3095600  
IRS Control Number:

Dear Taxpayer:

Your employer identification number (EIN) is 04-3095600. Please keep this number in your permanent records. You should enter your name and your EIN, exactly as shown above, on all business federal tax forms that require its use, and on any related correspondence or documents.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number ( ) \_\_\_\_\_ Hours \_\_\_\_\_

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,

*Henry J. Duchemin Jr.*

Henry J. Duchemin, Jr.  
Chief, Customer Service Branch 2

Enclosure(s):  
Copy of this letter