

2000 UNIFORM BUSINESS REPORT (UBR)

5/10/00-90

DOCUMENT # G58795

1. Entity Name

WESTSIDE CORPORATE CENTER, INC.

R

FILED
Jun 29, 2000 8:00 am
Secretary of State

05-10-2000 90175 029 ***150.00

Principal Place of Business

Mailing Address

C/O CORPORATE TAX DEPT
P O BOX 020816 3600 N.W. 82ND AVE.
MIAMI FL 33102

C/O CORPORATE TAX DEPT
P O BOX 020816 3600 N.W. 82ND AVE.
MIAMI FL 33102-0816

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 59-2557214

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

O'MEARA, VICKI A
3600 NW 82ND AVE
MIAMI FL 33168

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
NAME
STREET ADDRESS
CITY - ST - ZIP
CD
BURNS, M. ANTHONY
3600 N.W. 82ND AVE.
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
HUSTON, EDWIN A.
3600 N.W. 82ND AVE.
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VAT
HIGH, JOSHUA
3600 NW 82ND AVE
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
AT
PERRON, GAIL D
3600 NW 82ND AVE
MIAMI FL 33168 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
AT
DUARTE, JORGE
3600 N.W. 82ND AVE
Miami - FL 33166 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VPT
BRYAN, GLYNIS A
3600 NW 82ND AVE
MIAMI FL 33168 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VPT
W. DANIEL SUSIK
3600 NW 82ND AVE
MIAMI, FL 33193 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
GOODE, R. RAY
3600 NW 82 AVENUE
MIAMI FL ☐ Delete

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: *Jorge Duarte* *SECRETARY* *Treasurer* 4-24-00 305 500-3871
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #