2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H12996 1. Entity Name WESTBROOKE COMMUNITIES, INC.

Principal Place of Business

9350 SUNSET DR SUITE 100

9350 SUNSET DR. SUITE 100 MIAM) FL 33173 Mailing Address

9350 SUNSET DR. SUITE 100

MIAMI FL 33173

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2511971 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KEAN, MICHAEL Street Address (P.O. Box Number is Not Acceptable) BERMAN & KEAN, P.A. 2101 WEST COMMERCIAL BLVD #4100 FORT LAUDERDALE FL 33309 City Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Addition ☐ Change NAME CARR. JAMES NAME STREET ADDRESS 9350 SUNSET DR. SUITE 100 STREET ADDRESS 9350 CITY-ST-ZIP MIAMI FL 33173 CITY-ST-ZIP Mianu TITI F ☐ Delete TITLE Change ☐ Addition Hav old NAME EISENACHER, L H L. Eisenacher NAME 9350 Sunset Drive \$100 STREET ADDRESS 9350 SUNSET DR. SUITE 100 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33173 CITY-ST-7IP Mian TITLE ☐ Delete S TITLE ☐ Change Addition NAME IBARRIA, DIANA NAME Halvorsen clay STREET ADDRESS 9350 SUNSET DRIVE #100 STREET ADDRESS Parkury 15326 CITY-ST-ZIP MIAMI FL CITY-ST-ZIP IVVINE

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

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

Stephen S.

15 326

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Michael

5326

15326

SIGNATURE:

TITLE

NAME

TITLE

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TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CHERNYS, LEONARD

miami fl

MIAMI FL

WEBBER, DAVID

9350 SUNSET DRIVE #100

9350 SUNSET DRIVE #100

20, SOLOMOU STR. ALIMOS

ATHENS, GREECE 17-4 56

STENGOS, ANDREAS

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

💢 Delete

949-789-1618

☐ Change

☐ Change

Change

Addition

Addition

X Addition

CR2E034 (9/01)

FILED

05-06-2002 90186 026 ***150.00

May 06, 2002 8:00 am Secretary of State

Scarborough

Alton Parkway