

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

01 APR 23 PM 2:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L99000003366

1. Entity Name

CYBUR INVESTMENTS, L.L.C.

Principal Place of Business

1500 SAN REMO AVENUE, SUITE 185  
CORAL GABLES FL 33146

Mailing Address

1500 SAN REMO AVENUE, SUITE 185  
CORAL GABLES FL 33146



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

400 Arthur Godfrey Road

3. Mailing Address

400 Arthur Godfrey Road

Suite, Apt. #, etc.

#506

Suite, Apt. #, etc.

#506

City & State

Miami Beach, Florida

City & State

Miami Beach, Florida

Zip

33140

Country

USA

Zip

33140

Country

USA

4. FEI Number

65-0928050

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BANK, SCOTT A ESQ.

200 SOUTH BISCAYNE BLVD., SUITE 3410

DUANE, MORRIS & HECKSCHER, LLP

MIAMI FL 33131-2397

7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

500004161625--6  
-05/08/01--01041--020  
\*\*\*\*\*55.00 \*\*\*\*\*55.00

9. MANAGING MEMBERS/MEMBERS

TITLE MGR ☐ Delete  
NAME WSG MIAMI BEACH LLC  
STREET ADDRESS 1500 SAN REMO AVENUE, SUITE 185  
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition  
NAME WSG Miami Beach, LP  
STREET ADDRESS 400 Arthur Godfrey Road #506  
CITY-ST-ZIP Miami Beach, Florida 33140

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

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/16/01

305-673-3707

CR2E083 (11/00)