2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M77296

FILED Mar 19, 2004 Secretary of State

Entity Name: WESTBURY EMERALD GREENS, INC.

Current P	Principal Place of Business:	New Principal Plac	ce of Business:
	RDON DR FL 34102 US		
Current N	Mailing Address:	New Mailing Addr	ess:
	RDON DRIVE FL 34102 US		
FEI Number	r: 65-0104586 FEI Number Applied For() F	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Current Registered Agent:	Name and Address	s of New Registered Agent:
4001 TAM SUITE 250	CHOENECK & KING IIAMI TRAIL NORTH 0 FL 341033555 US		
	e named entity submits this statement for the purp te of Florida.	oose of changing its registe	ered office or registered agent, or both,
SIGNATU	RE:		
	Electronic Signature of Registered Agent		 Date
			Batto
Election Ca	impaign Financing Trust Fund Contribution ().		Suit
		ADDITIONS/CHAN	IGES TO OFFICERS AND DIRECTORS
OFFICER Title: Name: Address:	nmpaign Financing Trust Fund Contribution ().	ADDITIONS/CHAN Title: Name: Address: City-St-Zip:	
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Impaign Financing Trust Fund Contribution (). S AND DIRECTORS: DV () Delete DEGROOTE, GARY W 1455 LAKESHORE RD STE 201N BURLINGTON ONTA	Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
	Impaign Financing Trust Fund Contribution (). IS AND DIRECTORS: DV () Delete DEGROOTE, GARY W 1455 LAKESHORE RD STE 201N BURLINGTON ONTA CANADA L7S2J1, DP () Delete DEGROOTE, MICHAEL H 1111 INTERNATIONAL BLVD	Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	Impaign Financing Trust Fund Contribution (). SS AND DIRECTORS: DV () Delete DEGROOTE, GARY W 1455 LAKESHORE RD STE 201N BURLINGTON ONTA CANADA L7S2J1, DP () Delete DEGROOTE, MICHAEL H 1111 INTERNATIONAL BLVD BURLINGTON, ONTARIO, CA L7L 6W1 DV () Delete MARTYN, ROBERT W 11 VICTORIA STREET	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY PEKARUK V 03/19/2004