

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90212 009 ***150.00

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DOCUMENT # P00000109692

1. Entity Name
ACP WESTSHORE CORP.



Principal Place of Business
701 BRICKELL AVENUE SUITE 3000
MIAMI FL 33131

Mailing Address
701 BRICKELL AVENUE SUITE 3000
MIAMI FL 33131

2. Principal Place of Business
444 Brickell Avenue

3. Mailing Address
1111 Brickell Avenue

Suite, Apt. #, etc.
Suite 900

Suite, Apt. #, etc.
Suite 2500

City & State
Miami, Florida

City & State
Miami, Florida

Zip Country
33131 USA

Zip Country
33131 USA

4. FEI Number NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE SUITE 3000
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name
Stuart K. Hoffman, Esq.
Street Address (P.O. Box Number is Not Acceptable)

1111 Brickell Avenue, Suite 2500
City Miami, FL Zip Code 33131

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME OLAZARRA, ALLEN DE D
STREET ADDRESS 701 BRICKELL AVE, STE 3000
CITY-ST-ZIP MIAMI FL 33131

TITLE D ☐ Delete
NAME TOUZET, RODOLFO PRIO
STREET ADDRESS 701 BRICKELL AVE, STE 3000
CITY-ST-ZIP MIAMI FL 33131

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME Olazarra, Allen de C
STREET ADDRESS 444 Brickell Avenue, Suite 900
CITY-ST-ZIP Miami, Florida 33131

TITLE D ☒ Change ☐ Addition
NAME Touzet, Rodolfo Prio
STREET ADDRESS 444 Brickell Avenue, Suite 900
CITY-ST-ZIP Miami, Florida 33131

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE By: **SG**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Allen de Olazarra President

Date Daytime Phone #

CR2E034 (10/02)