

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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

05-02-2003 90212 010 ***150.00

0219973
AV

DOCUMENT # P01000024384

1. Entity Name

ACP WESTSHORE MANAGER CORP.



Principal Place of Business
**701 BRICKELL AVE. STE 3000
MIAMI FL 33131**

Mailing Address
**701 BRICKELL AVE. STE 3000
MIAMI FL 33131**

2. Principal Place of Business
444 Brickell Avenue

3. Mailing Address
1111 Brickell Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 900

Suite 2500

City & State

City & State

Miami, Florida

Miami, Florida

Zip

Zip

Country

Country

33131

USA

33131

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1099778**

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

**INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE, STE 3000
MIAMI FL 33131**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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

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: **ACP Westshore Manager Corp.**
Allen C. de Olazarra, President

Date

Daytime Phone #

CR2E034 (10/02)