2002 UNIFORM BUSINESS REPORT (UBR)

1/9/02-90023-027

FILED Feb 25, 2002 8:00 am

DOCUMENT # PO1000047266 WE DEVELOPMENTS, INC.							Secretary of State 01-09-2002 90023 027 ***150.00								
Principal Place of Business 2500 WESTON RD., STE. 302 WESTON FL 33331			Mailing Address 2500 WESTON RD., STE, 302 WESTON FL 33331			-			 İn Afıl İri				·		
2. Principal P	lace of Busin	ess	3. Mailing Address			7	1 1 01 111061 (11 100161 11011 10111 10111 1		OH	ij dikis diki 1831					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			7	DO NOT WRITE I	N THIS SE	PACE						į
City & State			City & State			4. 1	FEI Namber 117040	78)}-	Applied For Not Applicable	7				ļ
Zp		Country	Zip	Count	try		Certificate of Status Desired	\$	8.75 A	dditional ed	-				
	5. Nama	and Address of Current R	egistered Agent		Name	7. 1	Name and Address of New Regi	stered Aç	jent		7		₿₩		1
WEINER,	CRAIG R STON RD.,	STE 302	•		Street Address	(P.O. E	Box Number is Not Acceptable)				1	1			
WESTON	-	VIE. 40E		ĺ											
					City		gent, or both, in the State of Florida	FL	Zip Co	de	1				
9. This corpo Tax filing r	eation is elig	or printed name of registered agent and ble to satisfy its Intangible and elects to do so.	FILE NOW! After May 1, 20 Make Check Payat	II FEE	will be \$550.00		10. Election Campaign Financ Trust Fund Contribution.	DATE Sing	\$5.	00 May Be	 				
11.		OFFICERS AND D	RECTORS	12.			DDITIONS/CHANGES TO OFFICE				ړ ا				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2500 WES	INER, CRAIG R 10 WESTON RD., STE. 302 STON FL 33331						·	Change	Addition	CR2E034 (9/01)	- T			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delote		- 1			E	Change	☐ Addition	5	1			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		•	-		Į.	Change	☐ Addition		ALCONOMICS OF THE PERSON NAMED IN			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE	T ADDRESS				Change	Addition					
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13. I hereby ce indicated of the corp changed, of SIGNATI	on this report oration or the or on an alta	or supplemental report is tra- e receiver or trustee empower- chment with an address, with	ue and accurate and that mered to execute this report of all other like empowered.	iy signatu as require	re shall have the id by Chapter 60	same k 7, Florid	19,07(3)(i), Florida Stetutes, I furtilisegal effect as if made under cath; da Statutes; and that my name and UFTL 1-4-07	that I am pears in B	an officer block 11 o	nformation or director r Block 12 if			#		