2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000118820

Title:

Name:

Address:

City-St-Zip:

Entity Name: WESTBROOK MANAGEMENT, INC

() Delete

GONZALEZ, GRETEL

121 WEST 22ND ST

HIALEAH, FL 33010

FILED Apr 30, 2009 Secretary of State

	iei weerbix	CONTINUATION OF THE PARTY OF TH				
Current Principal Place of Business:				New Principal Place of Business:		
121 WEST 22ND ST HIALEAH, FL 33010				1759 PALM AVENUE HIALEAH, FL 33010		
Current Mailing Address:				New Mailing Address:		
2601 S. BA	/ REGISTERE YSHORE DR. · GROVE, FL	ED AGENTS, LLC , STE. 700 33133		C/O MELLAW REGIST 2601 S. BAYSHORE D COCONUT GROVE, F	R., STE. 700 Ć	
FEI Number:	20-1503395	FEI Number Applied For ()	FEI Nur	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CELLAW REGISTERED AGENTS, LLC 2601 SOUTH BAYSHORE DR #700 COCONUT GROVE, FL 33133 US				MELLAW REGISTERED AGENTS, LLC 2601 SOUTH BAYSHORE DR #700 COCONUT GROVE, FL 33133 US		
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: SANTIAGO ELJAIEK III, MGR				04/30/2009		
	Electron	ic Signature of Registered Age	ent		Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () SUAREZ, RAUL 121 WEST 22N HIALEAH, FL 3	D ST		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () SUAREZ, RAUL 121 WEST 22N HIALEAH, FL 3	D ST		Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: RAUL SUAREZ PD 04/30/2009

() Change () Addition