

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2000 8:00 am**  
**Secretary of State**

05-22-2000 90017 026 \*\*\*150.00

**DOCUMENT # P94000019318**

1. Entity Name

**WESTBROOKE AT OAK RIDGE, INC.**

Principal Place of Business

9350 SUNSET DRIVE  
 SUITE 100  
 MIAMI FL 33173  
 US

Mailing Address

9350 SUNSET DRIVE  
 SUITE 100  
 MIAMI FL 33173-3245  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0499046**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution.

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	CARR, JAMES	9350 SUNSET DRIVE, SUITE 100	MIAMI FL	<input type="checkbox"/>
S	EISENACHER, L. HAROLD	9350 SUNSET DRIVE, SUITE 100	MIAMI FL	<input type="checkbox"/>
D	MCGRAW, MIKE	5999 SUMMERSIDE DR SUITE 110	DALLAS TX 75252	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
	See Attachment.			<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
D	ANDREAS STENGOS	20, SOLOMOU STR ALIMOS	174 56 ATHENS, GREECE	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V/S	HAROLD EISENACHER	9350 SUNSET DRIVE #100	MIAMI, FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	LEONARD CHERNYS	9350 SUNSET DRIVE #100	MIAMI, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V	DIANA IBARRIA	9350 SUNSET DRIVE #100	MIAMI, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V	DAVID WEBBER	9350 SUNSET DRIVE #100	MIAMI, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V	ROBERT YURUEI	9350 SUNSET DRIVE #100	MIAMI, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Harold Eisenacher* 5/1/00

Date

Daytime Phone #

305-595-3281

CR2E034 (9/99)

Attach

D0053646

**2000 UNIFORM BUSINESS REPORT**

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WESTBROOKE AT OAKRIDGE, INC.

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ADDITION TO OFFICERS AND DIRECTORS

V  
FREDDY MARANTE  
9350 SUNSET DRIVE #100  
MIAMI, FL