

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 09, 2001 8:00 am
Secretary of State

02-09-2001 90766 025 ***150.00

DOCUMENT # P98000005227

1. Entity Name

IAI WESTWOOD, INC.

Principal Place of Business

~~C/O DAVID A. WEBSTER, ESQ.~~
701 PEACHTREE ROAD
ORLANDO FL 32804

Mailing Address

~~C/O DAVID A. WEBSTER, ESQ.~~
701 PEACHTREE ROAD
ORLANDO FL 32804

LUU1J040



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

c/o Webster & Partners, P.L.

3. Mailing Address

c/o Webster & Partners, P.L.

Suite, Apt. #, etc.

1936 Lee Road, Ste 101

Suite, Apt. #, etc.

1936 Lee Road, Ste 101

City & State

Winter Park, FL 32789

City & State

Winter Park, FL 32789

Zip

Country

Zip

Country

4. FEI Number

58-2370145

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

~~UWSA SERVICES, INC.~~
701 PEACHTREE ROAD
ORLANDO FL 32804

Name

W & P Services, Inc.

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

1936 Lee Road, Suite 101

City

Winter Park

FL

Zip Code
32789

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]

President

24 Jan 2001

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. ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **GAZDAR, HOMI**
STREET ADDRESS **200 BOULDER RIDGE ROAD**
CITY-ST-ZIP **SCARSDALE NY 10583**

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

TITLE **D** ☐ Delete
NAME **MAITRA, PINAK**
STREET ADDRESS **200 BOULDER RIDGE ROAD**
CITY-ST-ZIP **SCARSDALE NY 10583**

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

TITLE **D** ☐ Delete
NAME **BARNHARD, SETH**
STREET ADDRESS **5067 WINDING BRANCH DR.**
CITY-ST-ZIP **DUNWOODY GA 30338**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

Homi Gazdar

27 Jan 2001

Date

914-478-2727

Daytime Phone #

CR2E034 (10/00)