2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 06, 2002 8:00 am Secretary of State **DOCUMENT #** P98000065298 1. Entity Name 05-06-2002 90186 025 ***150.00 WESTBROOKE COMPANIES, INC. Principal Place of Business Mailing Address 9350 SUNSET DR SUITE 100 9350 SUNSET DR SUITE 100 U 11 U U & I MIAMI FL 33173 MIAMI FL 33173 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FE! Number Applied For 65-0867588 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KEAN, MICHAEL Street Address (P.O. Box Number is Not Acceptable) BERMAN & KEAN, PA 2101 WEST COMMERCIAL BLVD #4100 FORT LAUDERDALE FL 33309 City Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE **X** Delete TITLE X Addition STENGOS, ANDREAS NAME Claudia E. Feldman 9350 Sunset Brive, # 100 NAME STREET ADDRESS 20 SOLOMOU STR. ALIMOS STREET ADDRESS 9350 . CITY-ST-7IP 174 56 ATHENS GR-EECE CITY-ST-7/P Miami TITLE ☐ Delete TITLE Change NAME CARR, JAMES NAME Halvo/sen lay A STREET ADDRESS 9350 SUNSET DR STE 100 STREET ADDRESS Atton Parkway 15326 CITY-ST-ZIP **MIAM! FL 33173** CITY-ST-ZIP (A 92618 ٧S ☐ Delete TITLE Addition | ☐ Change Scarborough NAME EISENACHER, HAROLD tephen NAME STREET ADDRESS 9350 SUNSET DR SUTIE 100 STREET ADDRESS 1536 Alton CITY-ST-ZIP **MIAMI FL 33173** CITY-ST-ZIP VINE TITLE ☐ Delete TITLE Addition ☐ Change NAME IBARRIA, DIANA C. Covtruy NAME Michael 15326 Alton Parkway STREET ADDRESS 9350 SUNSET DRIVE #100 STREET ADDRESS CITY-ST-ZIP miami fl CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME WEBBER, DAVID H. Parnes NAME Andrew STREET ADDRESS 9350 SUNSET DRIVE #100 STREET ADDRESS 15326 A Hon CITY-ST-ZIP MIAMI FL CITY-ST-ZIP ruge Delete TITLE Change ☐ Addition NAME CHERNYS, LEONARD Harold L Eisenacher NAME

13. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS

CITY-ST-ZIP

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SIGNATURE:

9350 SUNSET DRIVE #100

MIAMI FL

STREET ADDRESS

CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sunset Drive, \$100

Date

33173