

Amended 2003
**FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

FILED

03 MAY 23 AM 8:00

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P98000084896

1. Entity Name

West Sunrise Development Corp



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

305 SE 11th Ave

Suite, Apt. #, etc.

3. Mailing Address

305 SE 11th Ave

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

4. FEI Number

650851614

Applied For

Not Applicable

Zip

33301

Country

USA

Zip

33301

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

7. Name and Address of Current Registered Agent

Name

William P. Regis

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

305 SE 11th Ave

City

Ft. Lauderdale

FL

Zip Code

33301

**DO NOT WRITE
 IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

William P. Regis

William P. Regis

May 22, 03

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

(NOTE: Registered Agent signature required when re-registering)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PSB
 William P. Regis
 305 SE 11th Ave
 Ft. Lauderdale FL 33301

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 CEO
 William P. Regis
 305 SE 11th Ave
 Ft. Lauderdale FL 33301

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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**DO NOT WRITE
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

William P. Regis

William P. Regis

5-22-03 954-294-2526

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

5/20