

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000055394

1. Entity Name

WSG WEST COLONIAL G.P. INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90063 019 ***158.75

Principal Place of Business

1500 SAN REMO AVE, SUITE 185
CORAL GABLES FL 33146

Mailing Address

1500 SAN REMO AVE, SUITE 185
CORAL GABLES FL 33146

2. Principal Place of Business

400 Arthur Godfrey Road

Suite, Apt. #, etc.

506

City & State

Miami Beach Florida

Zip

33146

Country

USA

3. Mailing Address

400 Arthur Godfrey Road

Suite, Apt. #, etc.

506

City & State

Miami Beach Florida

Zip

33146

Country

USA



DO NOT WRITE IN THIS SPACE

4. FFI Number 65-0938344

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Numbers Not Acceptable)

City

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 on behalf of registered agent and date filed. Circle)

(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, 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

TITLE ☐ Delete
 NAME D WOLMAN, PHILLIP
 STREET ADDRESS 1500 SAN REMO AVE, SUITE 185
 CITY-STATE-ZIP CORAL GABLES FL 33146

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 400 Arthur Godfrey Road
 CITY-STATE-ZIP Miami Beach, Florida 33146

TITLE ☐ Change ☒ Addition
 NAME D
 STREET ADDRESS Sheppard, Eric D.
 CITY-STATE-ZIP 400 Arthur Godfrey Road
 Miami Beach

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

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

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 a other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eric D Sheppard

2/1/01

Date

385-673-3707

Days to file fee

CR2E034 (10-00)