

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S54231

(3)

1. Corporation Name

WESTBROOKE AT MIRAMAR, INC.

Principal Place of Business

9040 SUNSET DRIVE
SUITE 15
MIAMI FL 33173

Mailing Address

9040 SUNSET DRIVE
SUITE 15
MIAMI FL 33173

2. Principal Place of Business

2a. Mailing Address

21 9350 Sunset Drive

26 9350 Sunset Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite #100

27 Suite #100

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

ROBBINS, CHARLES D. ESQ
2500 SUN BANK INT'L BUILDING
ONE S.E. THIRD AVE
MIAMI FL 33131

3. Date incorporated or Qualified

05/20/1991

3a. Date of Last Report

04/07/1995

4. FID Number

65-0286985

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

900 SUN BANK BUILDING

83

777 Brickell Avenue

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0902 and 607.1308, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is authorized to sign this statement on behalf of the corporation.

Signature of the person who is authorized to sign this statement on behalf of the corporation.

Date

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME D CARR, JAMES STREET ADDRESS 9040 SUNSET DRIVE S-15 CITY-STATE-ZIP MIAMI FL	TITLE NAME D.P. STREET ADDRESS 800001751338 CITY-STATE-ZIP 03/21/96-01014-030 ***800.00
TITLE NAME VTS EISENACHER, L. HAROLD STREET ADDRESS 9040 SUNSET DRIVE #15 CITY-STATE-ZIP MIAMI FL	TITLE NAME 9350 Sunset Drive, suite 100 CITY-STATE-ZIP MIAMI, FL 33173
TITLE NAME VAS CHERNYS, LEONARD STREET ADDRESS 9040 SUNSET DRIVE #15 CITY-STATE-ZIP MIAMI FL	TITLE NAME 9350 Sunset Drive, suite 100 CITY-STATE-ZIP MIAMI, FL 33173
TITLE NAME VAS MEDLECOT, RICHARD STREET ADDRESS 9040 SUNSET DRIVE #15 CITY-STATE-ZIP MIAMI FL	TITLE NAME 9350 Sunset Drive, suite 100 CITY-STATE-ZIP MIAMI, FL 33173
TITLE NAME VTS EISENACHER, L. HAROLD STREET ADDRESS 9040 SUNSET DRIVE #15 CITY-STATE-ZIP MIAMI FL	TITLE NAME 9350 Sunset Drive, suite 100 CITY-STATE-ZIP MIAMI, FL 33173
TITLE NAME VA IBARRIA, DIANA STREET ADDRESS 9040 SUNSET DRIVE #15 CITY-STATE-ZIP MIAMI FL	TITLE NAME 9350 Sunset Drive, suite 100 CITY-STATE-ZIP MIAMI, FL 33173

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption state in Section 119.07(3)(a) Florida Statutes. I further certify that the information is disclosed on this annual report or supplementary annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

HAROLD L. EISENACHER, V.P. 2/1/96 (305) 595-3281
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)