

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91097 033 ***150.00

DOCUMENT # V21084

1. Entity Name
WESTBROOKE AT WEST LAKE, INC.

| | |
|--|--|
| Principal Place of Business 9350 SUNSET DRIVE SUITE 100 MIAMI FL 33173 US | Mailing Address 9350 SUNSET DRIVE SUITE 100 MIAMI FL 33173 US |
|--|--|

| | |
|---|---|
| 2. Principal Place of Business Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. |
| City & State | City & State |



DO NOT WRITE IN THIS SPACE

| | |
|---|--|
| 4. FEI Number 65-0381823 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
**Michael Kean
 Berman & Kean, PA
 2101 W. Commercial Blvd., #4100
 Ft. Lauderdale, FL 33309**

7. Name and Address of New Registered Agent
**Michael Kean - Berman & Kean, PA
 2101 W. Commercial Blvd. # 4100
 Ft. Lauderdale FL 33309**

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: DATE: **4/20/01**

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 | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete D STENGOS, ANDREAS 20 SOLOMOU ST ALIMOS 174 56 ATHENS GREECE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete V CHERNYS, LEONARD 9350 SUNSET DR 100 MIAMI FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete V IBARRIA, DIANA 9350 SUNSET DR 100 MIAMI FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Delete V YURUBI, ROBERT 9350 SUNSET DR 100 MIAMI FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Delete V MARANTE, FREDDY 9350 SUNSET DR 100 MIAMI FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |

| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition P JAMES CARR 9350 SUNSET DRIVE # 100 MIAMI, FL 33173 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VS HAROLD EISENACHER 9350 SUNSET DRIVE # 100 MIAMI, FL 33173 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: DATE: **4/2/01** DAYTIME PHONE #: **305-595-3281**

CR2E034 (10/00)