

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

**FILED**  
**Sep 11, 2002 8:00 am**  
**Secretary of State**

09-11-2002 90065 039 \*\*\*150.00

DOCUMENT # **V61850**  
1. Entity Name **WEST TAMPAH ACRES INC**

**979361**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>FERNANDO RODRIGUEZ</b> Suite, Apt. #, etc. <b>1411 NW 89th COURT</b> City & State <b>MIAMI FL</b> Zip <b>33172-3005</b>	3. Mailing Address <b>FERNANDO RODRIGUEZ</b> Suite, Apt. #, etc. <b>1411 NW 89th COURT</b> City & State <b>MIAMI FL</b> Zip <b>33172-3005</b>
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DO NOT WRITE IN THIS SPACE

4. FEI Number <b>65-0388-388</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name <b>FERNANDO RODRIGUEZ</b>
Street Address (P.O. Box Number is Not Acceptable) <b>1411 NW 89th COURT</b>
City <b>MIAMI</b> FL Zip Code <b>33172-3005</b>

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 *Fernando Rodriguez* DATE **9/9/02**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**January 1 - May 1 Fee is \$150.00**  
**After May 1 Fee is \$550.00**  
**Amended UBR is \$61.25**  
**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 <b>D RODRIGUEZ RITA 1411 NW 89th COURT MIAMI FL 33172</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Rita Rodriguez* DATE **9/9/02**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034B (12/01)

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Attachment

979361

#V61850

Re: West Tamiami Acres Inc - FIE # 65-0388-388

September 9<sup>th</sup>, 2002

Dear Sir or Madam,

Enclosed is the annual report for the above mentioned corporation for year 2002. The corporation principal place of business and mailing address changed and as a result I did not get the original forms to be filled timely. Based on the above, I respectfully request that the late fee be abated.

If you have any further questions, please contact me at 305-436-5356/786-253-1530  
Or my address: 1411 NW 89<sup>th</sup> Court, Miami Florida 33172-3005

Sincerely

  
Fernando Rodriguez