

**FILED**  
**Mar 03, 2003 8:00 am**  
**Secretary of State**

03-03-2003 90853 040 \*\*\*150.00

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

**DOCUMENT # P0000041754**  
 1. Entity Name  
**EASTWEST RESEARCH CORPORATION**



Principal Place of Business      Mailing Address  
 450 E LAS OLAS BLVD      450 E LAS OLAS BLVD  
 950      950  
 FORT LAUDERDALE, FL 33301      FORT LAUDERDALE, FL 33301

2. Principal Place of Business      3. Mailing Address  
**3210 Cypress Creek Drive**      **3210 Cypress Creek Dr.**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
**Pompano Beach FL**      **Pompano Beach FL**  
 Zip      Country      Zip      Country  
**33062**      **USA**      **33062**      **USA**



Pompano Beach, FL 33062  
 Thank you.  
 David Berman  
 90041039

CHECK HERE IF MAKING CHANGES

4. FEI Number      Applied For  
**65-1004244**      Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**BERMAN, DAVID E**  
**343 LESLIE DRIVE**  
**HALLANDALE, FL 33009**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number Is Not Acceptable)  
**3210 Cypress Creek Drive**  
 City **Pompano Beach FL**      Zip Code **33062**

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 *David Berman*      DATE **2/25/03**

FILE NOW!!! FEE IS \$150.00  
 A/R: MAY 1, 2003 Fee will be \$550.00  
 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
<b>D</b>		<b>3210 Cypress Creek Drive</b>	
<b>BERMAN, DAVID E</b>		<b>Pompano Beach FL 33062</b>	
<b>450 E LAS OLAS BLVD #960</b>			
<b>FORT LAUDERDALE, FL 33301</b>			

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *David Berman*      DATE: **2/25/03**      PHONE: **786-271-5364**

CFR2034 (10/02)