

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 399947

1. Entity Name

BEBER, SILVERSTEIN & PARTNERS ADVERTISING, INC.

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90111 008 ***150.00

Principal Place of Business

3361 S.W. 3RD AVE.
MIAMI FL 33145

Mailing Address

3361 S.W. 3RD AVE.
MIAMI FL 33145-3911

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1401652

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BEBER, JOYCE
3361 S.W. 3RD AVE.
MIAMI FL 33145

Name

Ivor J. Bamberger

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

3361 SW Third Avenue

City

Miami

FL

Zip Code
33145

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, type or printed name of registered agent and title if applicable.

(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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	DS	SILVERSTEIN, ELAINE	2000 S BAYSHORE DR, #35 MIAMI FL 33133				
	DC	BEBER, JOYCE	3361 S.W. 3RD AVE. MIAMI FL 33145				
	P	BEBER, JENNIFER	2843 S. BAYSHORE DR. #PH2F MIAMI FL 33133				
	T	BAMBERGER, IVOR	421 HOLLY LANE PLANTATION FL 33317				

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)