

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

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90831 023 ***150.00

DOCUMENT # 217108

1. Entity Name
SIEBROS, INC.



Principal Place of Business
**11121 TAFT STREET
PEMBROKE PINES FL 33026**

Mailing Address
**11121 TAFT STREET
PEMBROKE PINES FL 33026**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1107360**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**SIEGEL, RITA
9696 SW 40TH ST
MIAMI FL 33165**

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After 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 | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|---------------|-----------------------|-------------------|-------|------|----------------|-------------|
| | PD | | | | | | |
| | SIEGEL, RITA | 9696 S.W. 46TH STREET | MIAMI FL | | | | |
| | D | | | | | | |
| | ROBIN BEAMAN | 11121 TAFT STREET | PEMBROKE PINES FL | | | | |
| | D | | | | | | |
| | SUSAN SHAFF | 17441 SPRINTREE LANE | BOCA RATON FL | | | | |
| | D | | | | | | |
| | ADRIAN SIEGEL | 2780 SW 84 AVENUE | MIAMI FL | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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: **X** **SIGNATURE REQUIRED** **Robbie Beaman, Dir.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/03

984-433988

Daytime Phone #

CR2E034 (10/02)