

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

03-03-2003 90477 044 ***150.00

DOCUMENT # 668739

1. Entity Name
WILBER, INC., OF BOCA.



Principal Place of Business
281 TOWN CENTER MALL
BOCA RATON FL 33491
US

Mailing Address
C/O E. SCOTT GOLDEN, ESQ.
644 SOUTHEAST 4TH AVENUE
FT. LAUDERDALE FL 33301



2. Principal Place of Business
6000 GLADES RD.

3. Mailing Address

Suite, Apt. #, etc.
SUITE 1008

Suite, Apt. #, etc.

City & State
Boca Raton, FL

City & State

Zip Country
33431 USA

Zip Country

4. FEI Number **59-1997506**

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOLDEN, E. SCOTT, ESQ.
644 S.E. 4TH AVENUE
FT. LAUDERDALE FL 33301

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 _____ (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	PST WILBER, CARL 9112-D S.W. 20TH STREET FT. LAUDERDALE FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: **Signature of Wilber**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/03 561-391-2516
Date Daytime Phone #

CR2E034 (10/02)