

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 823902

1. Entity Name

REIBER ESTATES LIMITED

FILED
Feb 03, 2001 8:00 am
Secretary of State

02-03-2001 90063 002 ***150.00

Principal Place of Business

37 STAR ISLAND
MIAMI FL 33139
US

Mailing Address

200 S. BISCAYNE BLVD.
2420
MIAMI FL 33131
US

010000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

19955 NE. 38th Court

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Unit 2802

City & State

Aventura, FL

City & State

Zip

33180

Country

USA.

Zip

Country

4. FEI Number

59-1302063

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MELAND, MARK S.
2420 FIRST UNION FINANCIAL CENTER
200 SOUTH BISCAYNE BOULEVARD
MIAMI FL 33131

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed 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, 2001 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

TITLE PD
NAME REIBER, NATHAN
STREET ADDRESS 11111 BISCAYNE BLVD #1054
CITY-ST-ZIP MIAMI FL 33181 ☐ Delete

TITLE SD
NAME REIBER, LAWRENCE
STREET ADDRESS 11111 BISCAYNE BLVD #1054
CITY-ST-ZIP MIAMI FL 33181 ☐ Delete

TITLE V
NAME MELAND, MARK S.
STREET ADDRESS 200 S. BISCAYNE BLVD. #2420
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME Reiber, Nathan
STREET ADDRESS 19955 N.E. 38th Court, #2802
CITY-ST-ZIP Aventura, FL 33180 ☒ Change ☐ Addition

TITLE SD
NAME Reiber, Lawrence
STREET ADDRESS 19955 N.E. 38th Court, #2802
CITY-ST-ZIP Aventura, FL 33180 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

MARK MELAND

Date

1/24/01

Daytime Phone #

(305) 358-6363

CR2E034 (10/00)