

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A94000000765

1. Entity Name

REIBER Enterprises, Ltd.

FILED

01 MAY 18 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

3000 E. Fletcher Ave
Suite #230
TAMPA, FL 33613

P.O. Box 272046
TAMPA, FL 33688

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

59-3252476

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

E. William Reiber
3000 E. Fletcher Ave.
Suite #230
TAMPA, FL 33613

Name

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

000004420950--0

-06/14/01--01120--001

City

****528FL5 Zip 528.25

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. Capital Contributions
as Shown on record.

10. Amount of Capital Contributions
in FLORIDA to date.

\$1,000,000.00

11. MAKE CHECK PAYABLE TO: DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME Reiber, E. William
STREET ADDRESS 3000 E. Fletcher Ave., Suite #230
CITY-ST-ZIP TAMPA, FL 33613

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME REIBER, TYLER D.
STREET ADDRESS P.O. Box 272046
CITY-ST-ZIP TAMPA, FL 33688

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

TYLER D. REIBER, General Partner 4/30/01 (813) 909-1819

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)