

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K59146

1. Entity Name

BERSA AND ASSOCIATES, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90989 040 ***150.00

Principal Place of Business

Mailing Address

250 CATALONIA AVENUE
SUITE 606
CORAL GABLES FL 33134
US

250 CATALONIA AVENUE
SUITE 606
CORAL GABLES FL 33134 6722
US

2. Principal Place of Business

3. Mailing Address

1172 So. DIXIE HWY
Suite, Apt. #, etc.
#411

1172 So. DIXIE HWY
Suite, Apt. #, etc.
#411

City & State
CORAL GABLES, FL

City & State
CORAL GABLES, FL

Zip
33146

Country
USA

Zip
33146

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2928547

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

BERGER, MAX
250 CATALONIA
CORAL GABLES FL 33134

Name
MAX BERGER
Street Address (P.O. Box Number is Not Acceptable)
301 ALMERIA AVE
SUITE - 345
City
CORAL GABLES, FL
Zip Code
33134

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 MAX BERGER 4/26/2000
(NOTE: Registered Agent signature required when reinstating)

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 PD
NAME BERGER, MAX
STREET ADDRESS 250 CATALONIA
CITY-ST-ZIP CORAL GABLES FL ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1172 So. DIXIE HWY - #411
CITY-ST-ZIP CORAL GABLES, FL 33146

TITLE SD
NAME SARUSKI, BERNARDO
STREET ADDRESS 250 CATALONIA
CITY-ST-ZIP CORAL GABLES FL ☒ Delete

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

TITLE VP
NAME BERGER, ALIZA
STREET ADDRESS 250 CATALONIA
CITY-ST-ZIP CORAL GABLES FL ☒ Delete

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

TITLE T
NAME BERGER, DAVID I.
STREET ADDRESS 250 CATALONIA
CITY-ST-ZIP CORAL GABLES FL ☒ Delete

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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: MAX BERGER 4/26/00 305-446-5355
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)