

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jul 05, 2001 8:00 am
Secretary of State

07-05-2001 90011 030 ***150.00

DOCUMENT # M05714

1. Entity Name

GARBER & SHEMESH, M.D., P.A.

Principal Place of Business

**% HARVEY I. GARBER, M.D.
5210 LINTON BLVD., SUITE 306
DELRAY BEACH FL 33484-6571**

Mailing Address

**% HARVEY I. GARBER, M.D.
5210 LINTON BLVD., SUITE 306
DELRAY BEACH FL 33484-6571****C0072470**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2445855

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

**GARBER, HARVEY I.
5210 LINTON BLVD.
SUITE 306
DELRAY BEACH FL 33445**

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 State10. 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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
GARBER, HARVEY I. (M.D.)
5210 LINTON BLVD. S-306
DELRAY BCH FL**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SHEMESH, ELIJAH M
5210 LINTON BLVD STE 306
DELRAY BCH FL 33484**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
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CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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 changes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TAXPAYERS COPY**HARVEY I. GARBER****1/4/01****561-495-0660**

GARBER & SHEMESH, M.D., P.A.

Attachment
DH#M05714
C0078470

HARVEY I. GARBER, M.D., F.A.C.S.
Colon and Rectal Surgery

ELI SHEMESH, M.D., F.A.C.S.
Colon and Rectal Surgery
General Surgery

5210 Linton Boulevard, Suite 306
Delray Beach, Florida 33484
Telephone: (561) 495-0660
Fax: (561) 495-0677

June 28, 2001

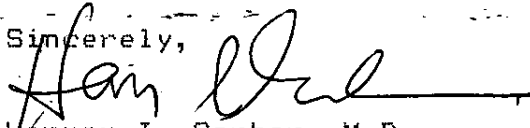
Ms. Katherine Harris
Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Gentlemen:

In January, I completed my Uniform Business Report and sent it to you with a check for \$150.00 to cover the fee. This was my check #4398. I have reviewed my business records and have noted that this check has not cleared. I am concerned that the Uniform Business Report was not processed or was lost. I have always payed this fee in a timely fashion, and you can verify that by checking my records. I am assuming that the report has not been processed and am sending you another check for \$150.00, as well as my copy of the Uniform Business Report. I hope that this is acceptable to you and that there are no other fees assessed.

I thank you very much for your cooperation in this matter.

Sincerely,


Harvey I. Garber, M.D.