## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Sep 17, 2002 8:00 am Secretary of State **DOCUMENT#** M90395 1. Entity Name 09-17-2002 90101 022 \*\*\*150 00 SHEILA SHERBERT, INC. Principal Place of Business Mailing Address 9840 ALTERNATE A1A 9840 ALTERNATE A1A STE. 401 STE. 401 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0071240 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHERBERT, SHEILIA S. Street Address (P.O. Box Number is Not Acceptable) 9840 ALTERNATE A1A STE. 401 PALM BEACH GARDENS FL 33410 City Zin 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (4/02)TITLE TSD ☐ Delete TITLE Addition SHERBERT.SHEILA 9840 ALTERNATE A1A, STE, 401 STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SHERBERT, SHEILA NAME STREET ADDRESS 9840 ALTERNATE A1A, STE. 401 STREET ADDRESS CITY-ST-ZIF PALM BEACH GARDENS FL CITY-ST-ZIP TITLE \_ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

not qualify for the exemption stated in Section 118 rete and that my signature shall have the same leg ute his report as required by Chapter 607, Florida

indicated on this report or suppl of the corporation or the receive

changed, or on an attachme

13. I hereby certify that the information supplied with this filing di

n Section 11907(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director

Statutes; and that my name appears in Block 11 or Block 12 if

9-8-02 561-775-163]

FILED

Bra l'itting &pecialist Bridal Registry / l'oundations Designer Lingerie &trectwear

Business Hours: Monday - Friday 10 - 7pm Saturday 10 - 5pm Sunday 12 - 5pm

EER ELEGANCE Sheila Sherbert
Owner/Operator

Promenade Plaza (561) 775-1631 Fax: (561) 775-1392

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Attachments Sheila's Sheer Elegance 9840 Alt. A1A, Suite 401 Palm Beach Gardens, FL 33410 #M00375 To Whom it may concoul. Dam just now paying my UBA. - sow Whost it was \$550 - When i it was Called to inquire, they saw many some and the second of the second o ig was late. 2) never received one saying it mos gre in word. She said to enclose a note wy this information in the Oheck for Those you!