	Applied For
65-0292125	Not Applicable
Status Desired	<b>75</b> Additional Required
ddress of New Registered Agent	
G MAN	
s Not Acceptable)	l
in the state of Florida.    State of Plorida	ip Code 33428
Make Check Paya Department of S	State 
	Change
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2ST COURT, APT.	409
DN, FL 33317	
<b>)24</b> (0	Change 🔲 Addition
CHUCK WAY	i

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCU 1. Entity Nam	MENT # <b>N43974</b>					M	lar 20, 2	2000 8:0 ry of Sta	00 am
CENTER	FOR INDEPENDENT LIVING	OF BR	OWARD, INC.			)		0050 016 ****61	
Principal Plac	e of Business	Mailing	) Address			)			
8857 W. MCNA TAMARAC FL: US			. MCNAB ROAD AC FL 33321-3630					0 4 0 0 0 0	)
2. Principal P	Place of Business	3. Malli	ng Address	<del></del>				)	0
		ite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE					
		¿ & State		4. FEI Number Applied For					
		Zip	ĺ			65-0292125	_ \$8.75 Ad	ot Applicable	
	<u></u>					<u></u>	of Status Desired	Fee Require	
	6. Name and Address of Current	Registere	d Agent	Name	_	7. Name and	Address of New Re	gistered Agent	
SCIBA, GARY					CHAEL ZIGMAN (P.O. Box Number is Not Acceptable)				
7500 N.W. FIRST COURT, APT. 409 PLANTATION FL 33317			21 City 7	21528 WOODCHUCK WAY  City POCA RATON FL Zip Code 334			de C		
8 The above	named entity submits this statement fo	or the purpo	nse of changing its r	enistered office o	or register	₹ <i>RATO</i>	in the state of Flori		128
o. mo above	1 )	, and purpe	obe of enginging term	bgidiored office t	a regional	ou agont, or son	, in the diale of the	au.	
	the Marie		Aug and a	- n 1	4		0	-/ 43	
SIGNATURE	Signature, typed or printed name of registered agent	and title it appl		Registered Agent signs				6-00 DATE	
SIGNATURE	Signature, typed or printed name of registered agent  FILE NOW: FEE IS \$61.25	9.		Registered Agent signs	sture required		Make	Check Payable to	<b></b>
SIGNATURE	FILE NOW:	9.	cable. (NOTE:	Registered Agent signs	\$5.0 Added	when reinstating)  May Be to Fees	Make Dep	Check Payable to	
	FILE NOW: FEE IS \$61.25	9.	cable. (NOTE:	Registered Agent signs Financing tion.	\$5.0 Added	May Be to Fees	Make Dep NGES TO OFFICER	Check Payable to artment of State	
10. TITLE NAME	FILE NOW: FEE IS \$61.25  OFFICERS AND DIF	9.	cable. (NOTE: Election Campaign   Trust Fund Contribu	Registered Agent signs Financing tion.   TITLE NAME	\$5.0 Added	May Be to Fees	Make Dep	Check Payable to artment of State	V 10
10. TITLE NAME STREET ADDRESS	FILE NOW: FEE IS \$61.25  OFFICERS AND DIE P SCIBA, GARY 7500 N.W. FIRST COURT, APT. 4	9.	cable. (NOTE: Election Campaign   Trust Fund Contribu	Financing tion.   TITLE NAME STREET ADDRESS	\$5.0 Added	May Be to Fees  ADDITIONS/CHA	Make Dep NGES TO OFFICER A RST COUR	Check Payable to artment of State  S AND DIRECTORS IN Change	V 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	FILE NOW: FEE IS \$61.25  OFFICERS AND DIF P SCIBA, GARY 7500 N.W. FIRST COURT, APT. 4 PLANTATION FL 33317	9.	Election Campaign   Trust Fund Contribu	Financing tion.  The NAME STREET ADDRESS CITY-ST-ZIP	\$5.0 Added	May Be to Fees  ADDITIONS/CHA	Make Dep	Check Payable to artment of State  S AND DIRECTORS IN  Change  T, APT. 40  33.317	Addition 9
10. TITLE NAME STREET ADDRESS	FILE NOW: FEE IS \$61.25  OFFICERS AND DIF P SCIBA, GARY 7500 N.W. FIRST COURT, APT. 4 PLANTATION FL 33317	9.	cable. (NOTE: Election Campaign   Trust Fund Contribu	Financing tion.   TITLE NAME STREET ADDRESS	\$5.0 Added	O May Be it to Fees  ADDITIONS/CHA  T  Y JCIBA O NW FI  ANTATA HAFL Z	Make Dep  NGES TO OFFICER  RST COUR  DAJ, FC	Check Payable to artment of State  S AND DIRECTORS IN Change  T, APT. 40  33.317  Change	V 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	FILE NOW: FEE IS \$61.25  OFFICERS AND DIF P SCIBA, GARY 7500 N.W. FIRST COURT, APT. 4 PLANTATION FL 33317	9.	Election Campaign   Trust Fund Contribu	Financing tion.   11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	\$5.0 Added	O May Be it to Fees  ADDITIONS/CHA  T  Y JCIBA O NW FI  ANTATA HAFL Z	Make Dep NGES TO OFFICER A RST COUR DAI, FL	Check Payable to artment of State  S AND DIRECTORS IN Change  T, APT. 40  33.317  Change	Addition 9
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	FILE NOW: FEE IS \$61.25  OFFICERS AND DIR P SCIBA, GARY 7500 N.W. FIRST COURT, APT. 4 PLANTATION FL 33317 V ZIGMAN, MICHAEL	9.	Election Campaign   Trust Fund Contribu	Financing tion.   11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	\$5.0 Addec	May Be to Fees  ADDITIONS/CHA  Y JCIBA O NW FI ANTATA HAEL Z B WOOT	Make Dep  NGES TO OFFICER  RST COUR  DAJ, FC	Check Payable to cartment of State  S AND DIRECTORS IN  Change  T, APT. 40  33.317  Change	A 10 Addition
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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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

IGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Da

SIGNATURE: