

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000003255 ✓

1. Entity Name

Miami IBM Users Group, Incorporated

03-14-2001 90010 002 *****70.00

FILED

N94000003255

01 MAR 27 PM 2:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

IBM
1 ALHAMBRA PLAZA
CORAL GABLES, FL 33134

Mailing Address

IBM
1 ALHAMBRA PLAZA
CORAL GABLES FL 33134

2. Principal Place of Business

1 ALHAMBRA PLAZA

Suite, Apt. #, etc.

8th FLOOR, IBM

City & State
CORAL GABLES FL

Zip
33134

Country
U.S.A.

3. Mailing Address

1 ALHAMBRA PLAZA

Suite, Apt. #, etc.

8th FLOOR, IBM

City & State
CORAL GABLES FL

Zip
33134

Country
U.S.A.

4. FEI Number

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

ERIC LIEBROSS
1 FINANCIAL PLAZA
Ste. 2200
FORT LAUDERDALE FL 33394

7. Name and Address of New Registered Agent

Name
GISELA SOBERON

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

1 ALHAMBRA PLAZA, 8th FLOOR, IBM

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 *Gisela Soberon*

(NOTE: Registered Agent signature required when reinstating)

3/3/01
DATE

FILE NOW.
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ERIK LIEBROSS
VP
1 FINANCIAL PLAZA
FORT LAUDERDALE FL 33394 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
GISELA SOBERON
1 ALHAMBRA PLAZA, IBM 8th FLOOR
CORAL GABLES FL 33134 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V.P.
ED GROSS
3900 N.W. 79th Ave. Suite 820
MIAMI FL 33166 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TREASURER
JASON WHITE
926 BLUEWOOD TERRACE
WESTON FL 33327 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 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.

SIGNATURE: *Gisela Soberon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/01
Date

305.442.3978
Daytime Phone #

CR2E037 (11/00)