

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 08, 2001 8:00 am**  
**Secretary of State**

03-08-2001 90138 027 \*\*\*150.00

**DOCUMENT # P00000033937**

1. Entity Name  
**BERTLINC, INC.**

Principal Place of Business  
**C/O 980 NORTH FEDERAL HWY.  
SUITE 412  
BOCA RATON FL 33432**

Mailing Address  
**C/O 980 NORTH FEDERAL HWY.  
SUITE 412  
BOCA RATON FL 33432**

**00023428**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**4742 N. Congress Ave**  
Suite, Apt. #, etc.

3. Mailing Address  
**7170 TURTE WALK**  
Suite, Apt. #, etc.

City & State  
**Boynton Beach, FL**  
Zip  
**33426** Country  
**USA**

City & State  
**BOCA RATON, FL**  
Zip  
**33487** Country  
**USA**

4. FEI Number  
**65-0997978** 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

**BLOCH, STUART E ESQ.  
BLOCH & MINERLEY, P.L.  
980 N. FEDERAL HWY. SUITE 412  
BOCA RATON FL 33432**

Name  
**STEVEN BERNSTEIN**

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

**7170 TURTLE WALK**

City  
**BOCA RATON FL** Zip Code  
**33487**

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 **Steven Bernstein** DATE **3-6-01**  
(Signature, typed or printed name of registered agent and title if applicable. (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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D BERNSTEIN, RAQUEL C/O 980 NORTH FEDERAL HWY. BOCA RATON FL 33432</b>	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Raquel Bernstein, Pres** DATE **3-6-01** DAYTIME PHONE # **561 969-7827**  
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

CR2E034 (10/00)