

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90053 018 ***150.00

DOCUMENT # P00000036441

1. Entity Name

INGBER FINANCIAL GROUP, INC.

Principal Place of Business

1650 SE 17TH ST., SUITE 301
FT. LAUDERDALE FL 33316

Mailing Address

1650 SE 17TH ST., SUITE 301
FT. LAUDERDALE FL 33316

2. Principal Place of Business

3071 N.W. 107th Avenue

3. Mailing Address

3071 N.W. 107th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Coral Springs FL

City & State

Coral Springs FL

Zip

Country

33065-3626

US

Zip

Country

33065-3626

US

4. FEI Number

Applied For

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

CHARLES J. GOLDMAN, P.A.
601 S. FEDERAL HWY.
HOLLYWOOD FL 33020

Name

Mark I. Ingber

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

3071 Northwest 107th Avenue

City

Coral Springs

FL

Zip Code

33065-3626

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

Mark I. Ingber President

Mark Ingber

4/25/01

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 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 D ☐ Delete
NAME INGBER, MARK
STREET ADDRESS 1650 SE 17TH ST., SUITE 301
CITY-ST-ZIP FT. LAUDERDALE FL 33316

TITLE D/P/S/T ☒ Change ☐ Addition
NAME Ingber Mark I.
STREET ADDRESS 3071 N.W. 107th Avenue
CITY-ST-ZIP Coral Springs, FL 33065-3626

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ 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 empowered.

SIGNATURE:

Mark I. Ingber

Mark Ingber

4/25/01

954-832-5454

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (10/00)