

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 07, 2003 8:00 am**  
**Secretary of State**

04-07-2003 90121 032 \*\*\*150.00

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**DOCUMENT # P00000067389**

1. Entity Name  
**PREMIER GLOBAL ENTERPRISES, INC.**



Principal Place of Business  
**133 NORTH US HIGHWAY ONE  
TEQUESTA FL 33469**

Mailing Address  
**133 NORTH US HIGHWAY ONE  
TEQUESTA FL 33469**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1030342**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**GOLDBERG, RICHARD  
C/O SIR SPEEDY  
133 NORTH U.S. HIGHWAY ONE  
TEQUESTA FL 33469**

Name

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

City

**FL**

Zip 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 \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>GOLDBERG, RICHARD</b>	
STREET ADDRESS	<b>401 SOUTH SEAS DRIVE APT 306</b>	
CITY-ST-ZIP	<b>JUPITER FL 33477</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> Delete
NAME	<b>GOLDBERG, FERNE</b>	
STREET ADDRESS	<b>401 SOUTH SEAS DRIVE APT 306</b>	
CITY-ST-ZIP	<b>JUPITER FL 33477</b>	
TITLE	<b>T</b>	<input type="checkbox"/> Delete
NAME	<b>GOLDBERG, RICHARD</b>	
STREET ADDRESS	<b>401 SOUTH SEAS DRIVE APT 306</b>	
CITY-ST-ZIP	<b>JUPITER FL 33477</b>	
TITLE	<b>SECRETARY</b>	<input type="checkbox"/> Delete
NAME	<b>GOLDBERG, FERNE</b>	
STREET ADDRESS	<b>261 ISLE WAY</b>	
CITY-ST-ZIP	<b>PALM BEACH GARDENS, FL 33418</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>261 Isle Way</b>	
CITY-ST-ZIP	<b>Palm Beach Gardens, FL 33418</b>	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>261 Isle Way</b>	
CITY-ST-ZIP	<b>Palm Beach Gardens, FL 33418</b>	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>261 Isle Way</b>	
CITY-ST-ZIP	<b>Palm Beach Gardens, FL 33418</b>	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>SEE LEFT</b>	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 607, 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:

**SIGNATURE REQUIRED**

03/18/03 561-747-7303

Date

Daytime Phone #

CR2E034 (10/02)