

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000023829

FILED
Mar 27, 2002 8:00 AM
Secretary of State

Entity Name: SECURITIES INVESTMENT BANKERS, INC.

Current Principal Place of Business:

16115 SW 117TH AVENUE
SUITE 25
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

16115 SW 117TH AVENUE
SUITE 25
MIAMI, FL 33177

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RAMPADARUTH, AMAL
292 SOUTH COUNTY ROAD STE 109
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

ABERCROMBIE ACCOUNTING SERVICES CORP
16115 SW 117 AVE
SUITE 25
MIAMI, FL 33157 US

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: WRAY ABERCROMBIE

03/27/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NUROCK, LYONEL
Address: 292 SOUTH COUNTY ROAD STE 109
City-St-Zip: PALM BEACH, FL 33480

Title: CEOT () Delete
Name: NUROCK, LYONEL
Address: 292 SOUTH COUNTY ROAD STE 109
City-St-Zip: PALM BEACH, FL 33480

Title: DS () Delete
Name: RAMPADARUTH, JADOMANEE
Address: 292 SOUTH COUNTY ROAD STE 109
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: NUROCK, LYONEL
Address: 16115 SW 117 AVE SUITE 25
City-St-Zip: MIAMI, FL 33177

Title: CEOT (X) Change () Addition
Name: NUROCK, LYONEL
Address: 16115 SW 117 AVE SUITE 25
City-St-Zip: MIAMI, FL 33177

Title: S (X) Change () Addition
Name: WRAY, ABERCROMBIE
Address: 16115 SW 117 AVE SUITE 25
City-St-Zip: MIAMI, FL 33177

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WRAY ABERCROMBIE

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03/27/2002

Electronic Signature of Signing Officer or Director

Date