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FILED

Feb 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000044533 (6)

1. Corporation Name

WEBER INDUSTRIES OF BROWARD, INC.

Principal Place of Business

10343 ROYAL PALM BLVD
SUITE 235
CORAL SPRINGS FL 33065

Mailing Address

10343 ROYAL PALM BLVD
SUITE 235
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/18/1993

4. FEI Number

65-0428275

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1440 CORAL Ridge Dr

Suite, Apt #, etc

22 SUITE 235

City & State

23 CORAL SPRINGS FL

Zip

24 33071

Country

25 BROWARD

2a. Mailing Address

26 1440 CORAL Ridge Dr

Suite, Apt #, etc

27 SUITE 235

City & State

28 CORAL SPRINGS FL

Zip

29 33071

Country

30 BROWARD

9. Name and Address of Current Registered Agent

SAGE, STACY W
11676 NW 20 DRIVE
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

81 Name

SAGE, STACY W.

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

11676 NW 20 DRIVE

83

84 City

CORAL SPRINGS

FL

85 Zip Code

33071

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Stacy W. Sage

Signature typed or printed name of registered agent and location of office

(NOTE: Registered Agent signature required when reinstating)

2/18/98

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VP
SAGE, BRUCE
11676 NW 20TH DRIVE
CORAL SPRINGS FL

☐ DELETE

1.2 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

P
PAGE, STACEY
11676 NW 20 DR
CORAL SPRINGS FL

☐ DELETE

1.3 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.4 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.5 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.6 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.7 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.8 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

VP
SAGE, BRUCE
11676 NW 20 DRIVE
CORAL SPRINGS FL 33071

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

P
SAGE, STACEY
11676 NW 20 DRIVE
CORAL SPRINGS FL 33071

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Stacy W. Sage

2/18/98 (954)340-0122

CR2034 (1097)