

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 08, 1999 8:00 am  
Secretary of State

04-08-1999 90059 025 \*\*\*150.00

DOCUMENT # P93000044533

1. Corporation Name

WEBER INDUSTRIES OF BROWARD, INC.



Principal Place of Business

1400 CORAL RIDGE DR  
SUITE 235  
CORAL SPRINGS FL 33071  
US

Mailing Address

1440 CORAL RIDGE DR  
SUITE 235  
CORAL SPRINGS FL 33071  
US

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 the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

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 STACEY 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

*Stacey W Sage*

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/1/99

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE VP  
NAME SAGE, BRUCE  
STREET ADDRESS 11676 NW 20TH DRIVE  
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE P  
NAME PAGE, STACEY  
STREET ADDRESS 11676 NW 20TH DR  
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE PRESIDENT  
2.2 NAME SAGE STACEY  
2.3 STREET ADDRESS 11676 NW 20 DR  
2.4 CITY-ST-ZIP CORAL SPRINGS FL 33071

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

*Stacey W Sage*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/99 (954) 340-0122  
Date Daytime Phone #

CR2E034 (11/98)