

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000044533

1. Entity Name

WEBER INDUSTRIES OF BROWARD, INC.

**FILED**  
**Mar 04, 2000 8:00 am**  
**Secretary of State**

03-04-2000 90076 023 \*\*\*150.00

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 33071-5433  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0428275

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

SAGE, STACEY W.  
11676 NW 20 DRIVE  
CORAL SPRINGS FL 33071

Name

SAGE STACEY W.

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

12404 NW 52 CT

City

CORAL SPRINGS

FL

Zip Code

33076

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

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, 2000 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 VP ☐ Delete  
NAME SAGE, BRUCE  
STREET ADDRESS 11676 NW 20TH DRIVE  
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE VP ☒ Change ☐ Addition  
NAME SAGE, BRUCE  
STREET ADDRESS 12404 NW 52 CT  
CITY-ST-ZIP CORAL SPRINGS FL 33076

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

TITLE P ☒ Change ☐ Addition  
NAME SAGE, STACEY  
STREET ADDRESS 12404 NW 52 CT  
CITY-ST-ZIP CORAL SPRINGS FL 33076

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
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: Stacey W Sage Stacey W Sage 2/7/00 340-0122  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)