

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90096 004 ***158.75

DOCUMENT # P96000001921

1. Entity Name

SOUTH BEACH BEEPERS TELECOMMUNICATIONS INC.

Principal Place of Business

319 S 14TH AVE
 HOLLYWOOD FL 33020
 US

Mailing Address

319 S 14TH AVE
 HOLLYWOOD FL 33020
 US

2. Principal Place of Business

710 WASHINGTON AVE

3. Mailing Address

710 WASHINGTON AVE

Suite, Apt. #, etc.

Unit C-10

Suite, Apt. #, etc.

Unit C-10

City & State

MIAMI BEACH, FL

City & State

MIAMI BEACH, FL

Zip

33139

Country

USA

Zip

33139

Country

U.S.A.

4. FEI Number

65-0631300

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIBAI, HELAL
319 S 14TH AVE
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name **BADRIEH BAHJAT-SIBAI**

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

710 WASHINGTON AVE Unit C-10

City **MIAMI BEACH**

FL

Zip Code **33139**

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

04/25/2001

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, 2001 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

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	SIBAI, HELAL	
STREET ADDRESS	319 S. 14TH AVE	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	RA	<input type="checkbox"/> Delete
NAME	BAHJAT-SIBAI, BADRIEH	
STREET ADDRESS	319 S. 14TH AVE	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	BADRIEH BAHJAT-SIBAI	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRESIDENT	
STREET ADDRESS	319 S. 14TH AVE	
CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HELAL SIBAI	
STREET ADDRESS	319 S. 14TH AVE	
CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NISSIRIN SIBAI	
STREET ADDRESS	710 WASHINGTON AVE	
CITY-ST-ZIP	MIAMI BEACH, FL. 33139	
TITLE	RA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BADRIEH BAHJAT-SIBAI	
STREET ADDRESS	710 WASHINGTON AVE	
CITY-ST-ZIP	MIAMI BEACH, FL 33139	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (10/00)

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

04/25/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #