

2000 UNIFORM BUSINESS REPORT (UBR)

page 1 of 2

DOCUMENT # P96000040098

1. Entity Name

ANDY CEBERIO, INC.

FILED

00 OCT 16 PM 5:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

19 ARBUTUS DRIVE
KEY WEST FL 33040
US

3709 PEARLMAN TERR
KEY WEST FL 33040
US

2. Principal Place of Business

905 16TH TERRACE

Suite, Apt. #, etc.

3. Mailing Address

905 16TH TERRACE

Suite, Apt. #, etc.

City & State

KEY WEST FLORIDA

City & State

KEY WEST FLORIDA

Zip 33040

Country

Zip 33040

Country

4. FEI Number

65-0700380

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

CEBERIO, ANDY
3709 PEARLMAN TERR
KEY WEST FL 33040

Name

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

City

FL

Zip Code

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PSD
NAME CEBERIO, ANDY
STREET ADDRESS 19 ARBUTUS DRIVE
CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME CEBERIO, KAREN L
STREET ADDRESS 19 ARBUTUS DRIVE
CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

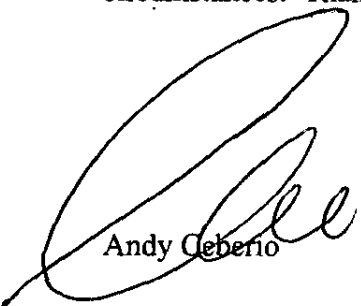
8/15/00 305 293-8699

CR2E034 (5/00)

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To Whom it may concern:

My wife and I sold our home located at 19 Arbutus Drive in December of 1999. We sold the property listed as our mailing address (3709 Pearlman Terrace) two years prior to that. We did not receive the 2000 Uniform Business Report until this past week at our new address which is 905 16th Terrace. We would have filed the report before the May deadline had we received it. We apologize that we did not inform anyone properly of our address changes. We are enclosing a check for \$150.00 for the filing fee in hopes that the penalty for not filing at the right time will be waived due to the extenuating circumstances. Thank you for your understanding in this matter.



Andy Ceberio