

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000012052

1. Entity Name  
F.I.G. CONSULTING, INC.

**FILED**  
**Jul 13, 2000 8:00 am**  
**Secretary of State**

07-13-2000 90016 010 \*\*\*550.00

Principal Place of Business  
2040 NE 194TH DRIVE  
NORTH MIAMI BEACH FL 33179  
US

Mailing Address  
2040 NE 194TH DRIVE  
NORTH MIAMI BEACH FL 33179  
US

A0067540



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0729055

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

REISMAN, STEPHEN H  
ONE SE 3RD AVE, SUITE 3050  
MIAMI FL 33131

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 PD  
NAME GOLDFARB, FRANK I  
STREET ADDRESS 19531 NE 18 COURT-  
CITY-ST-ZIP MIAMI-FL 33179 ☐ Delete

TITLE NAME  
STREET ADDRESS 2040 NE 194 DRIVE  
CITY-ST-ZIP North Miami Beach, FL 33179 ☒ Change ☐ Addition

TITLE VSD  
NAME GOLDFARB, HELEN P  
STREET ADDRESS 19531 NE 18 COURT-  
CITY-ST-ZIP MIAMI-FL 33179 ☐ Delete

TITLE NAME  
STREET ADDRESS 2040 NE 194 Drive  
CITY-ST-ZIP North Miami Beach, FL 33179 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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:

*Hellen P. Goldfarb*  
Hellen P. Goldfarb  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-6-00 (305)935-6247

Date

Daytime Phone #