

# 2000 UNIFORM BUSINESS REPORT (UBR)

1052 082100

DOCUMENT # P97000066478

1. Entity Name

S. EDENBURG & ASSOCIATES, Inc

Principal Place of Business

Mailing Address

4381 FOX RIDGE DR.  
WESTON, FL 33331

2. Principal Place of Business

4381 FOX RIDGE DR

3. Mailing Address

4381 FOX RIDGE DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WESTON, FLORIDA

City & State

WESTON, FLORIDA

4. FEI Number

65-0771970

Applied For

Not Applicable

Zip

33331

Country

USA

Zip

33331

Country

USA

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

SILVIA EDENBURG  
4381 FOX RIDGE DR  
WESTON, FL 33331

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 \$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 PRESIDENT ☐ Delete  
NAME SILVIA EDENBURG  
STREET ADDRESS 4381 FOX RIDGE DR  
CITY-ST-ZIP WESTON, FL 33331

TITLE ☐ Change ☐ Addition  
NAME 400003386204-2  
STREET ADDRESS -03/08/00--01008--012  
CITY-ST-ZIP \*\*\*\*\*300.00 \*\*\*\*\*300.00

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  
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  
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SILVIA EDENBURG

8/14/00

(305) 310-7902

Date

Daytime Phone #

CR2E034 (9/99)

20f2

August 14, 2000

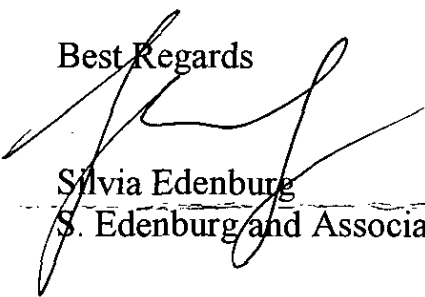
Dear Mrs. Milligan:

As per our phone conversation, this letter is to inform you that I have not received the 1999 Corporation Annual Reports due to address change occurred on September 1998.

I appreciate your help in reinstating this corporation and apologize for any caused inconvenience.

If you need any further information, please call me at your convenience to (305) 310-7902.

Best Regards



Silvia Edenburg  
S. Edenburg and Associates