

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000075557

1. Entity Name

BIERMAN AND ASSOCIATES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT -9 PM 5:22

Principal Place of Business

Mailing Address

~~8051 PLANTATION LAKES DR~~
~~PORT ST LUCIE FL 34986~~

~~8051 PLANTATION LAKES DR~~
~~PORT ST LUCIE FL 34986~~

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

Weston, FLA

Weston, FLA

33326

USA

33326

USA



REINSTATEMENT

4. FET Number

65-0777937

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

BIERMAN, BARRY

8051 PLANTATION LAKES DR
PORT ST LUCIE FL 34986

Name

BARRY BIERMAN

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

444 Sailboat Circle

City

Weston

FL

33326

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

BARRY BIERMAN, President 10/1/00

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 D
NAME BIERMAN, BARRY
STREET ADDRESS 8051 PLANTATION LAKES DR
CITY-ST-ZIP PORT ST LUCIE FL 34986

TITLE P/D
NAME BARRY BIERMAN
STREET ADDRESS 444 Sailboat Circle
CITY-ST-ZIP Weston, FL 33326

TITLE V
NAME BIERMAN, JENNIFER
STREET ADDRESS 8051 PLANTATION LAKES DR
CITY-ST-ZIP PORT ST LUCIE FL 34986

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
000003427710--3
-10/17/00--01068--022
***750.00 ***750.00

TITLE
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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 or without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARRY BIERMAN, Pres 10/1/00 561-971-0122

Date

Daytime Phone #

CR2E034 (5/00)