

**UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF FLORIDA**

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AUG 16 2011

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(1" from top of page, and centered, begin title of Court)

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF FLORIDA

Case No.

LEE SILBER

(Full Name of Plaintiff/s),

Plaintiff (s)

vs.

LITTLE CIGAR SHOP

89 NE. FIRST AVE

DOWNTOWN, MIAMI, FL.

(Full Name of Defendant/s),

Defendant(s).

TITLE OF DOCUMENT

I, LEE SILBER [plaintiff or defendant], in the above styled

cause, SUE LITTLE CIGAR SHOP FOR BLATENT

DISCRIMINATION I WENT INTO THEIR STORE YOUR

HONOR WAS DENIED ACCESS TO A FAX MACHINE

TO FAX IMPORTANT PAPERS WAS LIED TO YOUR

HONOR BY THE PEOPLE WHO WORK THERE,

I WANT TO SUE THEM FOR MILLIONS AS I

WILL PROVE YOUR HONOR UNDER OATH, PERJURY,

SWORN AFFADAVITS, FULL-PROOF LIE DETECTOR

TESTS, DEPOSITIONS, INTEGRATIONS, SUBPOENAS

YOUR HONOR THAT ALL I DID WAS WALK INTO  
~~THEIR~~ THEIR STORE AND TO USE THEIR  
FAX MACHINE, WAS TOLD IT WAS BROKEN  
YOUR HONOR "AN OUTRIGHT LIE". THIS AS  
YOU KNOW YOUR HONOR IS "BLATENT DISCRIM-  
INATION" YOUR HONOR AS I WILL PROVE TO YOUR  
HONOR; UNDER OATH, PERJURY, SWORN AFFADIMES,  
FULL PROOF LIE DETECTOR TESTS, DEPOSITIONS,  
INTERROGATORIES, SUBPOENAS YOUR HONOR WHEN  
YOU GIVE ME THE OPPORTUNITY TO SEE YOU  
YOUR HONOR.

Aug 16, 2011  
Dated: Month, day, year

Respectfully submitted,

LEE SILBER  
Name of Filer

Attorney Bar Number (if applicable)

Attorney E-mail Address (if applicable)

LEE SILBER  
Firm Name (if applicable)

4700 NW 32 AVE APT 64

Street Address

MICKEY FL 33072

City, State, Zip Code

Telephone: 786-454-0556

Facsimile: \_\_\_\_\_

Attorneys for Plaintiff/Defendant [Party name(s)]  
(if applicable)

**Certificate of Service**

I hereby certify that a true and correct copy of the foregoing was served by

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on all counsel or parties of record on the Service List below.

Lee Silber  
Signature of Filer