

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000002467

**Entity Name:** ROSENBERG RICH BAKER BERMAN, P.A.

**Current Principal Place of Business:**

265 DAVIDSON AVE  
#210  
SOMERSET, NJ 08873

**FILED**  
**Jan 23, 2015**  
**Secretary of State**  
**CC9399039126**

**Current Mailing Address:**

265 DAVIDSON AVE  
#210  
SOMERSET, NJ 08873

**FEI Number: 22-3271252**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title C  
Name ROTH, DAVID N  
Address 26 HORSESHOE DR  
City-State-Zip: HILLSBOROUGH NJ 08844

Title VC  
Name SCHWARTZ, CARL  
Address 26 DEAUVILLE DR  
City-State-Zip: PARSIPPANY NJ 07054

Title D  
Name TRUPPO, STEVEN  
Address 9 COVERED BRIDGE RD  
City-State-Zip: NESHANIC STA NJ 08853

Title D  
Name FRIEDMAN, LEONARD  
Address 13 CORNELL TRAIL  
City-State-Zip: HILLSBOROUGH NJ 08844

Title D  
Name SHERMAN, GARY  
Address 82 KEATS RD  
City-State-Zip: BASKING RIDGE NJ 07920

Title D  
Name QUICK, ROBERT  
Address 19 HORSESHOE DRIVE  
City-State-Zip: HILLSBOROUGH NJ 08844

Title DIRECTOR  
Name ZUCKER, BRIAN  
Address 2803 CONCORD DRIVE  
City-State-Zip: WALL NJ 07719

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: DAVID ROTH**

**PRESIDENT**

**01/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date