

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90185 028 ***150.00

DOCUMENT # 478627

1. Entity Name
ROLO OF MIAMI, INC.



Principal Place of Business

~~18215 COLLINS AVENUE~~

~~MIAMI BEACH FL 33160~~

Mailing Address

~~18215 COLLINS AVENUE~~

~~MIAMI BEACH FL 33160~~

90028572



2. Principal Place of Business

13850 Stirling Rd

3. Mailing Address

13850 Stirling Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

Southwest Ranches FL

City & State

Southwest Ranches FL

Zip

33330

Country

FLORIDA

Zip

33330

Country

FLORIDA

4. FEI Number

59-1608018

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LUCAS, ROBERT F.

~~18215 COLLINS AVENUE~~

~~MIAMI BEACH FL 33160~~

Name

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

13850 Stirling Rd

City

Southwest Ranches FL

Zip Code

33330

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **LUCAS, ROBERT F.**
STREET ADDRESS ~~18215 COLLINS AVENUE~~
CITY-ST-ZIP ~~MIAMI BEACH FL~~

TITLE **VD** ☐ Delete
NAME **LUCAS, FRANCIS, W**
STREET ADDRESS ~~18215 COLLINS AVENUE~~
CITY-ST-ZIP ~~MIAMI BEACH FL~~

TITLE **TD** ☐ Delete
NAME **LUCAS, LORETTA**
STREET ADDRESS ~~18215 COLLINS AVENUE~~
CITY-ST-ZIP ~~MIAMI BEACH FL~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **13850 Stirling Rd**
CITY-ST-ZIP **SOUTHWEST RANCHES FL 33330**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **13850 Stirling Rd**
CITY-ST-ZIP **SOUTHWEST RANCHES FL 33330**

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CITY-ST-ZIP

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

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert F. Lucas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-03

Date

Daytime Phone #