

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 16, 2003 8:00 am
Secretary of State

01-16-2003 90049 009 ***150.00

DOCUMENT # 574480

1. Entity Name
DANIEL ROETTELE, INC.



Principal Place of Business
**13571 57 PLACE NORTH
WEST PALM BEACH FL 33411
US**

Mailing Address
**13571 57 PLACE NORTH
WEST PALM BEACH FL 33411
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1828614**

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

**ROETTELE, DANIEL
13571 57 PLACE NORTH
WEST PALM BEACH FL 33411**

Name **Linda Roettele**
Street Address (P.O. Box Number is Not Acceptable)
13571 57 PLACE NORTH

City **West Palm Beach FL FL** Zip Code **33411**

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

SIGNATURE **Linda Roettele**
Signature, typed or printed name of registered agent and title if applicable.

Linda Roettele
(NOTE: Registered Agent signature required when reinstating)

DATE **01-06-03**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	ROETTELE, DANIEL	13571 57 PLACE NORTH	WEST PALM BEACH FL 33411	<input type="checkbox"/>
ST	ROETTELE, LINDA	13571 57 PLACE NORTH	WEST PALM BEACH FL 33411	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
V.P.	Vice-President	Daniel Roettele	13571 57 Place North West Palm Beach FL 33411	<input checked="" type="checkbox"/>	<input type="checkbox"/>
P.	PRESIDENT	Linda Roettele	13571 57 PLACE NORTH WEST PALM BEACH, FL 33411	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **01-06-03** DAYTIME PHONE # **561-7957594**

CR2E034 (10/02)