

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

F 99000003145

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90125 019 ***150.00

Principal Place of Business

Mailing Address

Roxy.com, Inc.

2. Principal Place of Business

3380 N 28 Terrace

3. Mailing Address

3380 N 28 Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Hollywood, Florida

City & State

Hollywood, Florida

4. FEI Number

04-3311314

Applied For

Not Applicable

Zip

Country

33020

U.S.A.

Zip

Country

33020

U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Swerdlow, Richard ESQ.
3380 N 28 Terrace
Hollywood, FL 33020

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

TITLE PD
NAME Jeans, Michael
STREET ADDRESS 167 Westford Rd
CITY-ST-ZIP Concord, MA ☐ Delete

TITLE
NAME Rosetti, Phillip P
STREET ADDRESS 14 Southgate Rd
CITY-ST-ZIP Wellesley, MA ☐ Delete

TITLE T
NAME Ambrose, Stephen P.
STREET ADDRESS 159 Mt Vernon St.
CITY-ST-ZIP Malden, MA ☐ Delete

TITLE CD
NAME Clougherty, Keith
STREET ADDRESS 600 Pinewood Rd
CITY-ST-ZIP Bolton, MA ☐ Delete

TITLE D
NAME Waters, Lauren
STREET ADDRESS 846 Sudbury Rd
CITY-ST-ZIP Concord, MA ☐ Delete

TITLE D
NAME Helgeland, Eric
STREET ADDRESS 2828 Jordan Ave
CITY-ST-ZIP Minnetonka MN ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/27/00

Date

(954) 921-1234

Daytime Phone #

X112

CR2E034 (9/99)