

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K34909

1. Entity Name

ROCRA, INC.

**FILED**  
**Apr 27, 2000 8:00 am**  
**Secretary of State**

04-27-2000 90005 009 \*\*\*150.00

Principal Place of Business

% CRAIG ROBINS  
230 FIFTH STREET  
MIAMI BEACH FL 33139

Mailing Address

% CRAIG ROBINS  
230 FIFTH STREET  
MIAMI BEACH FL 33139-6602

2. Principal Place of Business

1632 Pennsylvania Ave  
Suite, Apt. #, etc.

3. Mailing Address

1632 Pennsylvania Ave  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Miami Beach, FL

City & State

Miami Beach, FL

4. FEI Number

65-0115691

Applied For

Not Applicable

Zip

Country

33139 USA

Zip

Country

33139 USA

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

ROBINS, CRAIG  
230 FIFTH STREET  
MIAMI BEACH FL 33139

Name

Craig Robins

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

1632 Pennsylvania Ave

City

Miami Beach

FL

Zip Code

33139

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)

4/6/00  
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDS  
NAME ROBINS, CRAIG  
STREET ADDRESS 230 FIFTH STREET  
CITY-ST-ZIP MIAMI BEACH FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS 1632 Pennsylvania Ave  
CITY-ST-ZIP Miami Beach, FL 33139

☒ Change ☐ Addition

TITLE VP  
NAME GRETENSTEIN, STEVEN  
STREET ADDRESS 230 5TH ST.  
CITY-ST-ZIP MIAMI BEACH FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS 1632 Pennsylvania Ave  
CITY-ST-ZIP Miami Beach, FL 33139

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

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

4/19/00 (305) 531-8700  
Date Daytime Phone #

CR2E034 (9/99)