

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **K59373**

1. Entity Name

JEFF ROSENBERG, INC.

FILED

02 NOV -6 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
1655 DREXEL AVE. 209 MIAMI BEACH FL 33139 US		1655 DREXEL AVE. 209 MIAMI BEACH FL 33139 US	
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	65-0095051	Applied For	
		Not Applicable	
5. Certificate of Status Desired		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ROSENBERG, ROSS
9100 S DADELAND BLVD
ONE DATRAN CENTER SUITE 910
MIAMI FL 33156

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	DPST ROSENBERG, JEFFREY 1655 DREXEL AVE #208 MIAMI BCH FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400008828174 11/06/02--01056--006 **158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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]* **Jeffrey Rosenberg** 4/26/12 3056735831

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)

JEFF ROSENBERG INC.

1655 DREXEL AVE STE 208
MIAMI BEACH FL 33139
Tel (305) 673-5636 Fax (305) 673-1308

October 29, 2002

FLORIDA DEPT. OF STATE
Division of Corporations -Annual Report Filings
P O Box 6327
Tallahassee FL 32314

RE: 2002 Annual Report #K59373

Dear Sir/Madam:

We have received the notice of Administrative Dissolution because you did not received our annual fee. We mailed the check #444 for \$150.00 dated 4/26/2002 with the form attached on April 30, 2002 by certified mail. We did not realized that our check did not cleared, but we have the certified mail receipt that the check was received by the Division of Corporation. We believe the check was lost or it is misplaced. We are an small business and under current economic conditions, we can not afford to pay an additional fee to reinstate our corporation. Please renewed our corporation, we are including a replacement check at the regular fees for 2002.

We appreciate your cooperation and help.

Sincerely,



Jeffrey Rosenberg, President

Attached:

Annual copy of report

Replacement check for 2002

Copy of certified mail