

2001 UNIFORM BUSINESS REPORT (UBR)

0011829 AF

DOCUMENT # L00000002769

1. Entity Name
ROSCOE, LLC

FILED

01 MAY -3 PM 1:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
3033 N.E. 32ND AVENUE
FORT LAUDERDALE FL 33308

Mailing Address
3033 N.E. 32ND AVENUE
FORT LAUDERDALE FL 33308



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
same as above

3. Mailing Address
same as above

City & State

City & State

4. FEI Number

65-0992517

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIOTRKOWSKI, JOEL S
317- 71ST STREET
MIAMI BEACH FL 33141

Name

John H. Wile

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

3033 NE 32nd Avenue

City

Fort Laud. Fla.

FL

Zip Code

33308

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, type or print name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

5/1/2001

FILE NO. W!!!! FEE IS \$50.00
Make Check Payable to Department of State

400004336814--7
-05/31/01--01093--015
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
WILE, JOHN
3033 N.E. 32ND AVENUE
FORT LAUDERDALE FL 33308 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

John H. Wile

5/1/2001

(954) 566-3044

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)