

2000 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jan 13, 2000 8:00 am
Secretary of State

01-13-2000 90037 017 ***150.00

DOCUMENT # L01062**1. Entity Name**
ROLEC ENCLOSURES USA, INC.**Principal Place of Business****Mailing Address**EDWARDS, CURTIS & WARD, P.A.
3055 CARDINAL DRIVE SUITE 202
VERO BEACH FL 32963% EDWARDS, CURTIS & WARD, P.A.
3055 CARDINAL DRIVE SUITE 202
VERO BEACH FL 32963-4921**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0131051

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent**CURTIS, NED P.
3055 CARDINAL DRIVE
SUITE 202
VERO BEACH FL 32963**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** ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.**11. OFFICERS AND DIRECTORS**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
ROSE, FRIEDHELM
D32457 PORTAW.FALCA,MINDENER
W. GERMANY WEG 24B OC ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
ROSE, MATTHIAS
3260 RINTEIN 1, GERHART-HAUPTMANN-WEG14
WEST GERMANY ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
CURTIS, NED P.
3055 CARDINAL DR #202
VERO BEACH FL ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
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:**Ned P. Curtis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ned P. Curtis 1/6/00 561/234-8400

Date

Daytime Phone #